# L11000006206

| (Requestor's Name)                      |  |  |  |
|---|--|--|--|
| (Address)                               |  |  |  |
| (Address)                               |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |
| (Business Entity Name)                  |  |  |  |
| (Document Number)                       |  |  |  |
| Certified Copies Certificates of Status |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |
|   |  |  |  |
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#### **COVER LETTER**

| TO:    | Registration Section  | W                                      |               |
|--------|---|--|---------------|
|        | Division of Corporations  | · 3·                                   |               |
|        | Scotia Properties LLC   | V                                      |               |
| SUB.   | JECT:   |  |               |
| ., .   | Name of Limited Liability C                                       | Jompany                                |               |
| DOC    | UMENT NUMBER:   |  |               |
| The e  | enclosed Resignation of Registered Agent for a Limited ling.      | Liability Company and fee are          | submitted     |
| Pleas  | e return all correspondence concerning this matter to the         | e following:                           |               |
|        | Joy Arpin-Sypert  | •                                      |               |
|        | Name of Person  |  |               |
| Santia | Properties LLC  |  |               |
| Scona  | riopetites E.i.s  |  |               |
|        | Name of Firm/Company  |  |               |
| 352 Si | xth Street South  |  |               |
|        | Address   |  |               |
| Naples | EFI.34102   |  |               |
| •      |   | t 3                                    | 20            |
|        | City/State and Zip Code   |  | 22            |
| gsyper | 1@ mae.com  | =                                      |               |
|        |   | •                                      | d)            |
| Į.     | -mail address: (to be used for future annual report notification) |  | -             |
| For fi | arther information concerning this matter, please call:           |  | <b>:</b>      |
|        | 1 100000  |  | ب.<br><u></u> |
|        | Joy ARPIN - SYIPER at (339) Name of Person                        | N30 - 190/<br>Daytime Telephone Number | 9             |
|        | Name of Person Area Code  | Daytime Telephone Number               |               |

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

### **Mailing Address:**

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

#### **Street Address:**

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

#### 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000006206

Entity Name: SCOTIA PROPERTIES, LLC

**Current Principal Place of Business:** 

352 SIXTH STREET SOUTH NAPLES, FL 34102

**Current Mailing Address:** 

19249 LA SERENA DRIVE ESTERO, FL 33967 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

**FILED** 

Apr 12, 2022

Secretary of State

0589193704CC

Name and Address of Current Registered Agent:

OVERDIJKING, CATHERINE K 19249 LA SERENA DRIVE ESTERO, FL 33967 US

The above named entity submits this statement for the purpose of changing its maistered office or ingistered agent, or both, in the State of Florida

SIGNATURE:

Electronic Signature of Registered Agent

June 04, 3022

Authorized Person(s) Detail:

Title

MGR

Name

ARPIN-SYPERT, E. JOY

Address

352 SIXTH STREET SOUTH

City-State-Zip: NAPLES FL 34102

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same logal effect as if made under oath, that I am a managing member or manager of the limited bability company or the receiver or trustive empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

## STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

| Pursuant to the provisions of section 605.0115, Florida Catherine K Overdijking | <u>-</u>  |
|---|---|
| Name of Registered Agent  | hereby resigns as   |
| Scotia Properties LLC Registered Agent for                                      |   |
| Registered Agent for  |   |
| Name of Limited Liabili   | ty Company  |
| L11000006206  |   |
| Document Number, if known   |   |
| A copy of this resignation was mailed to the above list                         | ed limited liability company at its last known address.         |
| The agency is terminated and the office discontinued o                          | n the 31st day after the date on which this statement is filed. |
| Catherne K. O.  | Verdo King of Resigning Again                                   |
| If signing on behalf of an entity:  | of Resigning Agent 2022 JUL .                                   |
| Typed or Pri  |   |
| Capacity  |   |
|   | ' . <del>'</del> •  |

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

### FILING FEES:

\$ 85.00 Active limited liability company

\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company