

Florida Department of State
Division of Corporations
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H210000268113ABCV

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To: Division of Corporations
 Fax Number : (850) 617-6363

From: Account Name : BUSH ROSS, P.A.
 Account Number : 119990000150
 Phone : (813) 224-9255
 Fax Number : (813) 223-9620

2021 JAN 20 AM 8:54
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 TALLAHASSEE, FL

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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC REGISTERED AGENT RESIGNATION
RLS POMPAÑO 1531 NW 7TH WAY, LLC

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 01 |
| Estimated Charge | \$25.00 |

RECEIVED

2021 JAN 20 PM 4:29

JAN 21 2021
 G Kinsey

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

BUSH ROSS REGISTERED AGENT SERVICES, LLC, hereby resigns as
Name of Registered Agent

Registered Agent for RLS POMPANO 1531 NW 7TH WAY, LLC

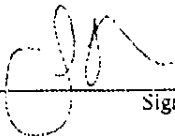
Name of Limited Liability Company

L11000048221

Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.


Signature of Resigning Agent

If signing on behalf of an entity:

JOSEPH A. PROBASCO, ESQ.

Typed or Printed Name

VICE PRESIDENT OF BUSH ROSS REGISTERED AGENT SERVICES, LLC

Capacity

FILING FEES:

\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company

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