## 111000059686

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## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: BAINBRIDGE COMMERCIAL P		
Name	of Limited Liabili	ty Company
DOCUMENT NUMBER: L11000059686		
The enclosed Resignation of Registered A for filing.	Agent for a Limit	ed Liability Company and fee are submitted
Please return all correspondence concerni	ing this matter to	the following:
JEFFREY A. DEUTCH		
Name of Person		_
Nelson Mullins Riley & Scarborough LLP		
Name of Firm/Company		_
1905 NW Corporate Boulevard, Suite 310		
Address		_
Boca Raton, FL 33431		
City/State and Zip Code	•	_
jeffrey.deutch@nelsonmullins.com		
E-mail address: (to be used for future annua	report notification	<del></del>
For further information concerning this m	natter, please call	:
Jeffrey A. Deutch	561	343-6960 Daytime Telephone Number
Name of Person	Area Coc	e 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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

Pursuant to the provis	ions of section 605.0115. Florida S	atutes, the undersigned,
Jeffrey A. Deutch P.A.		, hereby resigns as
	Name of Registered Agent	
Registered Agent for	BAINBRIDGE COMMERCIAL PRO	PERTIES, LLC
	Name of Limited Liability	Company
L11000059686		3
Document	Number, if known	
		limited liability company at its last known address.
The agency is termina	>m {	he 31st day after the date on which this statement is filed  Resigning Agent
If signing on behalf o	f an entity:	
	Jeffrey A. Deutch	
	Typed or Printe	I Name
	President	
	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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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