

# L11000066628

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

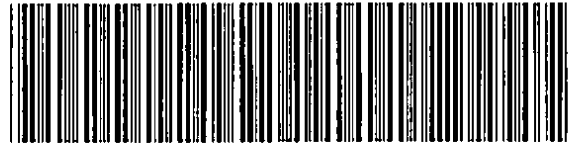
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

J DENNIS

JUL 27 2023

Office Use Only



600409032666

06/30/22--01015--017 \*\*95.00

FILED  
SECRETARY OF STATE  
OFFICE OF CORPORATIONS  
2023 MAY 30 AM 10:51

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** LMC ARROYO GRANDE, LLC

\_\_\_\_\_  
Name of Limited Liability Company

**DOCUMENT NUMBER:** L11000066628

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MAE BARBA

\_\_\_\_\_  
Name of Person

PARACORP INCORPORATED

\_\_\_\_\_  
Name of Firm/Company

2804 Gateway Oaks Dr #100

\_\_\_\_\_  
Address

Sacramento, CA 95833

\_\_\_\_\_  
City/State and Zip Code

mbarba@myparacorp.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MAE BARBA

at ( 800 ) 533-7272

\_\_\_\_\_  
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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

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

PARACORP INCORPORATED, hereby resigns as  
Name of Registered Agent

Registered Agent for LMC ARROYO GRANDE, LLC

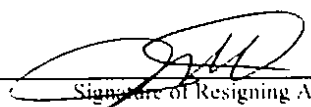
Name of Limited Liability Company

L11000066628

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:

Jody Moua

Typed or Printed Name

Asst. Secretary for Paracorp Incorporated

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2023 MAY 30 AM 10:51