

L 11000079896

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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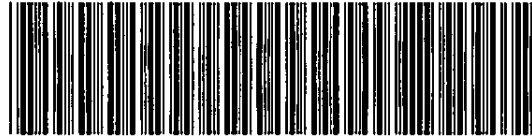
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

2016 JAN 19 P 12:46

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: White Knights & Vultures I, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L11000079896

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:

Charles N Cleland Jr PA
Name of Person

Law Offices of Charles N Cleland Jr PA
Name of Firm/Company

2127 Ringling Blvd, suite 104
Address

Sarasota, FL 34237
City/State and Zip Code

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

For further information concerning this matter, please call:

Charles N Cleland Jr PA at (941) 955-1595
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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,

Andrew M Badolato, hereby resigns as of 12/31/12
Name of Registered Agent

Registered Agent for White Knights & Vultures I, LLC
Name of Limited Liability Company

L11000079896
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.

Andrew Badolato
Signature of Resigning Agent

If signing on behalf of an entity:

Typed or Printed Name

Capacity

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2018 JAN 19 P 12:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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