

L12000010484

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

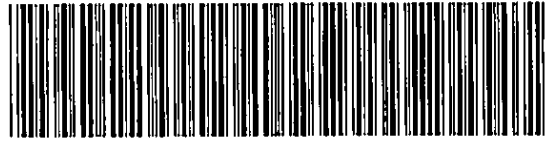
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
2016 JUN 20 AM 9:01
TALLAHASSEE FLORIDA

JUN 21 2016
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ocean House LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L 12000010484

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:

JOHN B ROGERS
Name of Person

JOHN B ROGERS PA
Name of Firm/Company

2502 NW 83RD WAY
Address

CORAL SPRINGS FL 33065
City/State and Zip Code

JBROGERSPA@YAHOO.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOHN B ROGERS at (954) 235 6574
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 8, 2018

JOHN B ROGERS
JOHN B ROGERS PA
2502 NW 83RD WAY
CORAL SPRINGS, FL 33065

SUBJECT: OCEAN HOUSE LLC
Ref. Number: L12000010484

We have received your document for OCEAN HOUSE LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris
Regulatory Specialist II

Letter Number: 818A00012023

6/16/18
Sorry.
Change included
[Signature]

RECEIVED
2018 JUN 20 AM 10:35
DIVISION OF CORP
TALLAHASSEE, FL

FILED
2018 JUN 20 AM 9:01
TALLAHASSEE, FL

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

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

JOHN B ROGERS PA, hereby resigns as
Name of Registered Agent

Registered Agent for OCEAN HOUSE LLC
Name of Limited Liability Company

L12000010484
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.

John B Rogers
Signature of Resigning Agent

If signing on behalf of an entity:

JOHN B ROGERS PA
Typed or Printed Name
OWNER
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
2018 JUN 20 AM 8:01
TALLAHASSEE, FLORIDA