

(Requestor's Name)	
(Address)	
(Address)	
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PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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R. WHITE

Julie Ann Garber P.O. Box 1240 Estero, FL 33929 (239) 591-6357

May 23, 2014

Via UPS

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re:

Duval Lot, LLC

Whitehead Properties I, LLC Whitehead Properties II, LLC

Dear Sir or Madam:

Enclosed please find a Statement of Resignation of Registered Agent for a Limited Liability Company for each of the LLCs listed above along with a check in the amount of \$75.00 for the filing fees.

Also enclosed is a copy of each document. Please return a date-stamped copy of each document to my attention in the envelope provided.

Please contact me at the telephone number referenced above if there are any questions or problems.

Sincerely,

Julie Ann Garber

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

rursuant to the provisions of	of section 605.0115, Florida Statutes, the undersig	gnea,			
JULIE ANN GARBER	he	ereby resigns as			
Ni	ame of Registered Agent	reey resigns as			
Registered Agent for WH	ITEHEAD PROPERTIES II, LLC				
	Name of Limited Liability Company				,
L12000065987					
Document Numb	er, if known				
A copy of this resignation	was mailed to the above listed limited liability cor	npany at its last kno	own add	iress.	
The agency is terminated a	nd the office discontinued on the 31st day after the	e date on which this	s staten	nent is	filed
	The Un A 05/23/	14.		47	ï
If signing on behalf of an e	ntity:		g.	153 C3	
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_	Typed or Printed Name			Çş	S)
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FILING FEES:

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withdrawn limited liability company \$ 85.00 \$ 25.00

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