

L13000035516

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

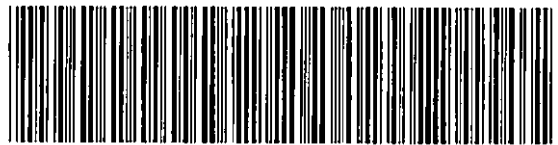
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SEC. OF STATE
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Boruch-David, LLC

Name of Limited Liability Company

DOCUMENT NUMBER: L13000035516

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:

William E. Boyes, Esq.

Name of Person

Boyes, Farina & Matwiczuk, P.A.

Name of Firm/Company

3300 PGA Boulevard, Suite 600

Address

Palm Beach Gardens, FL 33410

City/State and Zip Code

bboyes@bfmlaw.com

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

For further information concerning this matter, please call:

William E. Boyes (561) 694-7979

Name of Person

at (_____) _____

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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
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 provisions of section 605.0115, Florida Statutes, the undersigned,

David Baum

, hereby resigns as

Name of Registered Agent

Registered Agent for Boruch-David, LLC

Name of Limited Liability Company

L13000035516

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.

See Attached

Signature of Resigning Agent

If signing on behalf of an entity:

Typed or Printed Name

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\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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

RESIGNATION AS MANAGER

The undersigned confirms the following:

1. He is currently the Manager of Boruch-David, LLC (LLC").
2. Pursuant to the Settlement Agreement Regarding Reimbursement Obligations and the Amended and Restated Seymour Baum Residuary Trust #1, the undersigned resigns to serve as Manager.
3. The undersigned hereby submits his Resignation and confirms he resigns from the above stated LLC.
4. This Resignation is effective as of the date that the Settlement Agreement was fully signed by all, i.e., May 1, 2024.

IN WITNESS WHEREOF on 18th day of November, 2024.

Signed in the presence of:

David Young DYoung

David Baum
David Baum, as as Manager of Boruch-David, LLC

Hanson Gregoire

STATE OF FLORIDA

COUNTY OF PALM BEACH
Broward

THE UPS STORE #3646
1121 SOUTH MILITARY TRAIL
DEERFIELD BEACH, FL 33442
PH: 954-725-0655
FAX: 954 725-0654

Sworn to and subscribed before me by David Baum, as Manager of Boruch-David, LLC, and David Young and Hanson Gregoire witnesses on this 18th day of November, 2024, all of whom personally appeared before me.

David Baum is personally known to me or has produced FL Driver License as identification. David Young is personally known to me or has produced FL Driver License as identification. Hanson Gregoire is personally known to me or has produced FL Driver License as identification.

(NOTARY SEAL)

DYoung
NOTARY PUBLIC



DAVID YOUNG
Commission # HH 215241
Expires January 11, 2026