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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
(Bu	usiness Entity Nar	ne)
(Dc	ocument Number)	
Certified Copies	_ Certificates	s of Status
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Jeanne L. Seewald

Direct Phone: 239.254.2905 Direct Fax: 239.254.2942 Email: jseewald@hahnlaw.com

April 18, 2019

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

HAHN 🎛 LOESER

Re: 120702 Holdings, LLC

Dear Sir/Madam:

Enclosed for filing with respect to the above-referenced company is a Statement of Resignation of Registered Agent and our check in the amount of \$85.00 for the filing fee.

Please return all correspondence regarding this matter to the following:

Jeanne L. Seewald, Esq. Hahn Loeser & Parks, LLP 5811 Pelican Bay Boulevard, Suite 650 Naples, FL 34108

If you have any questions or require additional information, please call me at the number above.

ordially yours. HAHN LOESER & PARKS LLP

eanne L. Seewald

JLS/caf Enclosure

10924186.1

HAHN LOESER & PARKS LLP attorneys at law

cleveland columbus naples fort myers san diego chicago 5811 Pelican Bay Boulevard, Suite 650 Naples, Florida 34108 phone 239.254.2900 fax 239.592.7716 hahnlaw.com

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

Name of Registered Agent

HL Statutory Agent, Inc.

, hereby resigns as

Registered Agent for _____ Holdings, LLC

Name of Limited Liability Company

L13000080676

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:

 Jeanne L. Seewald
 Typed or Printed Name

 Vice President
 Typed or Printed Name

 Capacity
 Typed or Printed Name

- \$ 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 - withdrawn limited liability company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, F1, 32314