# 113000136007

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# **COVER LETTER**

Suncoast Power and Sail, LLC SUBJECT:\_\_ Name of Limited Liability Company DOCUMENT NUMBER: L13000136007 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: United States Corporation Agents, Inc. Name of Person Legalzoom.com, Inc. Name of Firm/Company 9900 Spectrum Dr. Address Austin, TX 78717 City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Janna Pantoja Name of Person

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

TO:

Registration Section Division of Corporations

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

Pursuant to the provisions of section 6	05.0115, Florida Statut	tes, the undersigned,	
United States Corporation Agents, Inc.  Name of Registered Agent		, hereby resigns as	
		, tteretry realigns ta	, nerely realigns as
Registered Agent for Suncoast Pov	wer and Sail, LLC		
Nam	ne of Limited Liability Com	pany	
L13000136007			
Document Number, if known			
A copy of this resignation was mailed	to the above listed limi	ited liability company at its last	known address.
The agency is terminated and the offic	e discontinued on the 3	31st day after the date on which	this statement is filed.
	Signature of Resi	igning Agent	FILEED 18 OCT 15 PM SECRETARY OF PALLAHASSEE, F
If signing on behalf of an entity:			SEE SEE
Cheyenne	Moseley		
	Typed or Printed Na	me	¥ 59 STATE LORIDA
Asst. Secreta	ary for United States Co	prporation Agents, Inc.	<sup>7</sup> <b>≯</b> ™ <b>6</b>

# FILING FEES:

Capacity

\$ 85.00 Active limited liability company \$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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