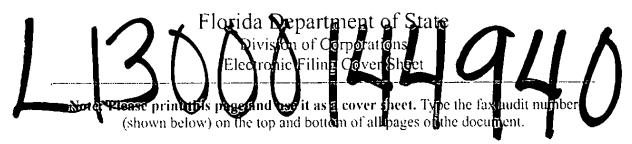
Division of Corporations



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From:

Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A.

Account Number : 076077001702 Phone : (407)841-1200

Fax Number : (407)423-1831

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LLC REGISTERED AGENT RESIGNATION THE BALCONY TUSCALOOSA LLC

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(((H220003881573)))

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ons of section 605.0115, Florida Statutes, the unc	dersigned,	
Dean Mead Services, L	LC	, hereby resigns as	
	Name of Registered Agent	_,	
Registered Agent for _			
The Balcony Tuscaloos	a L1.C		
	Name of Limited Liability Company		•
L13000144940			
Document 1	Sumber, if known		
•	tion was mailed to the above listed limited liability and the office discontinued on the 31st day af		
	Dean Mend Services, LLC By: Signature of Resigning Agen	·· ··	
If signing on behalf of	-	:	2022
	Christopher R. D'Amico	·	2022 MOV 14
	Typed or Printed Name	<u> </u>	X
	Vice President of Sole Member	27	
	Capacity		PH 2:30
			·

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Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company \$ 85.00 \$ 25.00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

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