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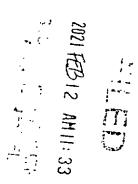
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| PICK-UP WAIT MAIL |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
| Special instructions to Filing Officer. |
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Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

February 4, 2021

MARGARET STOPP 350 W CEDAR ST, STE 100 PENSACOLA, FL 32502

SUBJECT: BRK LAND OF PENSACOLA, LLC

Ref. Number: L13000176911

We have received your document for BRK LAND OF PENSACOLA, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA CORPORATION, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Octavia L Simmons
Regulatory Specialist II Supervisor

Letter Number: 521A00002514

As requested, please see the attached completed Cover Letter, along with the completed and signed Statement of Resignation of Registered Agent for a Limited Liability Company.

www.sunbiz.org

COVER LETTER

| SUBJECT: | BRK of Pe | ensacola, LLC | | |
|--|---------------------------|---|---|-----------------------|
| SUBJECT: | | Name of Limited Li | ability Company | |
| DOCUMENT N | UMBER: | L13000176911 | | |
| The enclosed Res | signation of R | legistered Agent for a L | imited Liability Company and fee are | submitted |
| Please return all | corresponden | ce concerning this matte | er to the following: | |
| Margaret T. | Stopp Name of | | · | |
| | Name of | Person | | |
| | Name of Fire | m/Company | | |
| 350 W. Ced | dar St., Ste. | | | , |
| Pensacola, | FL 32502 City/State ar | nd Zip Code | | |
| | • | future annual report notification | • | |
| Judy_Pinet | ite Name of Person | at (<u>85</u> | 50) 434-3541 a Code Daytime Telephone Number | |
| Enclosed is a che liability company limited liability of | v or \$25.00 fc | able to the Florida Depa or an administratively di | artment of State for \$85.00 for an acti issolved, voluntarily dissolved or with | ive limited hdrawn |

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations

TO:

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 provision | ons of section 605.0115, Florida Statutes, the | undersigned, | · | É | - |
|---------------------------|--|-------------------------------|--------------|-------------|------------|
| Margaret T. Stopp | | , hereby resigns as | | 的12 | |
| <u>-</u> | Name of Registered Agent | thereby resigns as | : - | | 1.1 |
| Registered Agent for _ | BRK of Pensacola, LLC | | | AH 11: 33 | C/4 (33.4) |
| | | | سد مع است | ယ္ | |
| | Name of Limited Liability Company | | 757 | | |
| | | | | | |
| L13000176911 | | | | | |
| Document N | umber, if known | | | | |
| A copy of this resignati | on was mailed to the above listed limited liab | oility company at its last kr | nown addr | ess. | |
| The agency is terminate | ed and the office discontinued on the 31st day | after the date on which th | nis stateme | nt is filed | l. |
| | Signature of Resigning A | gent | | | |
| If signing on behalf of | an entity: | | | | |
| | | | | | |
| | Typed or Printed Name | | | | |
| | Capacity | | | | |

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