## L14000072349

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**SEP** 05 2019 **M**. SOLOMON FLORIDA RESEARCH & FILING SERVICES, INC.

1211 CIRCLE DR

TALLAHASSEE, FL 32301

PH: 850-524-4381

PLEASE FILE THE ATTACHED RESIGNATION OF REGISTERED AGENT FOR:

**BAYSIDE RENTALS LLC** 

PLEASE RETURN A STAMPED COPY

CK# 8335 FOR:

\$95.00

(\$25.00 for this filing)

THANK YOU!

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

Pursuant to the provisions	of section 605.0115	, Florida Statutes, the und	lersigned,			
ATRIUM REGISTERED AGENTS, INC.			, hereby resigns as			
1	Name of Registered Agen	t	_,,			
Registered Agent for BA	YSIDE RENTAL	SLLC			_ <del>_</del>	
<del></del>	Name of Limi	ted Liability Company			<u>_</u> ,	
L14000072349						
Document Nurr	nber, if known	<del></del>				
A copy of this resignation	was mailed to the a	hove listed limited liabilit	y company at its last known	addre:	ŝS.	
The agency is terminated	and the office discor	Signature of Resigning Agent	ter the date on which this sta	atemen	t is file	d.
If signing on behalf of an entity:					2019	
	RALPH A. NAR	)I		5. 5.	35	
	T) VICE PRESIDEN	yped or Printed Name NT, DIRECTOR		; ;	2019 SEP -4	;~·
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	<b>FILING \$</b> 85.00 <b>\$</b> 25.00	Active limited liability	ived/ voluntarily dissolved/	ı		

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