

L14 000 187 195

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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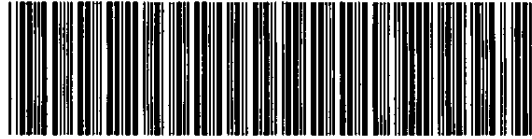
(Business Entity Name)

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MAR 19 2018

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 MAR 16 AM 8:03

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: VINTAGE CREEK LAND VENTURES, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L14000187195

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:

Jeffrey Kronengold

Name of Person

Name of Firm/Company

201 SE 12th Street, Suite 100

Address

Fort Lauderdale, FL 33316

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jeffrey Kronengold

Name of Person

at (954) 324-1718

Area Code

Daytime Telephone Number

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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

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

Jeffrey L Kronengold

Name of Registered Agent

, hereby resigns as

Registered Agent for VINTAGE CREEK LAND VENTURES, LLC

Name of Limited Liability Company

L14000187195

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:

Typed or Printed Name

Capacity

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 MAR 16 AM 8:02

FILING FEES:

\$ 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, FL 32314