

2019-03-14 11:12  
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Division of Corporations

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**US00099158**

Florida Department of State  
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Account Number : I20040000182  
Phone : (305)444-7662  
Fax Number : (305)444-7275

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Email Address: Cesar.jo863@hotmail.com

TALLAHASSEE, FLORIDA

2019 MAR 14 P 11:38

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**LLC REGISTERED AGENT RESIGNATION  
ICONBAY 3504, LLC**

Certificate of Status	0
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Page Count	01
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## STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

Arista Law & Tax

, hereby resigns as

Name of Registered Agent

Registered Agent for ICONBAY 3504, LLC

Name of Limited Liability Company

L15000099758

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:

Eduardo R. Arista

Typed or Printed Name

President

Capacity

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\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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

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