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COVER LETTER

GULF HARBOUR DEVELOPMENT, LLC SUBJECT:	
Name of Limited Liability	y Company
DOCUMENT NUMBER: L15000102028	
The enclosed Resignation of Registered Agent for a Limit for filing.	ed Liability Company and fee are submitted
Please return all correspondence concerning this matter to	the following:
Stephen W. Miller	
Name of Person	_
Gulf Harbour Development, LLC	
Name of Firm/Company	_
9270 Belleza Way #105	
Address	_
Fort Myers, Florida 33908	
City/State and Zip Code	
swfloridarealestate@aol.com	
E-mail address: (to be used for future annual report notification)	_
For further information concerning this matter, please call:	
Stephen W. Miller	771-0420
Name of Person at (at () c 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

TO: Registration Section

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

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 provi	sions of section 605.0115, Florida Statutes,	, the undersigned.	
Sam J. Saad III PA		, hereby resigns as	
	Name of Registered Agent		
Registered Agent for	Gulf Harbour Development, LLC	2019 DEC SECRET	
5 5 -			
	Name of Limited Liability Compar	The state of the s	
1.15000102028		PH 5: 42 OF STATE SSEE, FL	
Documen	t Number, if known	F 5	
A copy of this resign	ation was mailed to the above listed limited	d liability company at its last known address.	
The agency is termin	nated and the office discontinued on the 31s	et day after the date on which this statement is filed	i.
It ciming on behalf of	,		
If signing on behalf of	or an entity.		
	Sam J. Saad III		
	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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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