

L150000104431

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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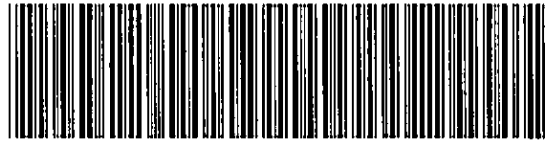
(Business Entity Name)

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2020 APR -3 PM 4: 22
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RAIRES

APR 16 2020
ALBRITTON

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

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

Chase A. Berger, Esq., on behalf of BERGER FIRM PA _____, hereby resigns as

Name of Registered Agent

Registered Agent for ICON ORLANDO, LLC

Name of Limited Liability Company

L15000104431

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:

Chase A. Berger, Esq., on behalf of BERGER FIRM PA

Typed or Printed Name

Authorized Member

Capacity

STATE OF FLORIDA
TALLAHASSEE

2020 APR -3 PM 4: 22

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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withdrawn limited liability company~~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**