

L15000106903

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

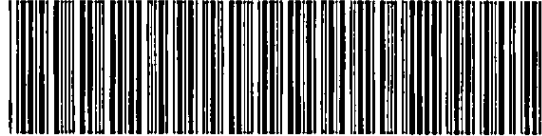
(Business Entity Name)

(Document Number)

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02/08/22--01012--012 **25.00

Resignation of
RA

FILED
2022 FEB 25 AM 10:57
CLERK OF STATE
ALABAMA

A. RAMSEY
FEB 28 2022

*00789, 00524, 00671

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Atlantis Management Property Services
Name of Limited Liability Company

DOCUMENT NUMBER: L 15000 106 903

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:

Robert Stolpmann
Name of Person

Atlantis Management Property Services
Name of Firm/Company

2305 Valdivia St
Address

St. Augustine FL 32092
City/State and Zip Code

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

For further information concerning this matter, please call:

Robert Stolpmann at (386) 212-9119
Name of Person Area Code Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for ~~\$25.00~~ for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



RECEIVED

FLORIDA DEPARTMENT OF STATE
Division of Corporations

2022 FEB 25 AM 8:17

SECRETARY OF STATE
TALLAHASSEE, FL

February 17, 2022

ROBERT STOLPMANN
ATLANTIS MANAGEMENT PROPERTY SERVICES
2305 VALDAVIA ST
ST. AUGUSTINE, FL 32092 US

SUBJECT: ATLANTIS MANAGEMENT PROPERTY SERVICES, LLC
Ref. Number: L15000106903

We have received your document for ATLANTIS MANAGEMENT PROPERTY SERVICES, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form that you submitted is incorrect. It is for a corporation and your entity is an LLC. I have enclosed the correct form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6823.

Annette Ramsey
OPS

Letter Number: 822A00004012

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

Robert Stolpmann

Name of Registered Agent / MGR

, hereby resigns as

Registered Agent for

Atlantis Management Property Services, LLC

Name of Limited Liability Company

L15000106903

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]

Signature of Resigning Agent

If signing on behalf of an entity:

Robert Stolpmann

Typed or Printed Name

Registered Agent / MGR

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