L15000155410

	(Requestor's Name)		
	(Address)		
	(Address)	_	
	(City/State/Zip/Phone #)		
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(Document Number)			
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O SIMMONS AUG () : 2018

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Royal Rose			2018	70	
	Name of Limited Liability	Company	E	11	
DOCUMENT NUMBER:	L15000155410			ر	
The enclosed Resignation of Re for filing.	gistered Agent for a Limited	Liability Company and f	(D): 1		
Please return all correspondence	e concerning this matter to the	ne following:	5		B
Kurt H	ilberth				-
Name of I	Person				

Hunter & Hunter, P.A. Name of Firm/Company

1930 Tyler St. Address

Hollywood, FL 33020 City/State and Zip Code

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

For further information concerning this matter, please call:

Kurt Hilberthat (954)925-8080Name of PersonArea CodeDaytime 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

INHS17 (2/14)

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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,

Kurt S. Hilberth	, hereby resigns as
Name of Registered A	
Registered Agent for <u></u> <u></u>	nann
Royal Rose	es, LLC
Name of L	imited Liability Company
L15000155410	
Document Number, if known	
A copy of this resignation was mailed to the	e above listed limited liability company at its last known adeess.
The agency is terminated and the office dis	continued on the 31st day after the date on which the statement is filed
t	
	Signature of Resigning Agent
If signing on behalf of an entity:	~ 0
	Typed or Printed Name
	Capacity
FILIN	G FEES:

- \$ 85.00 \$ 25.00
- Active limited liability company Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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