

To: -185061/6383

Place: 2 of 3. 202111-29 13 18: L9 CST 19542030845 11/29/21, 1:17

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To:				
	Division of Co	rporations	22	
	Fax Number	: (850)617-6383	121	
			2021 NOV 2	
From:			ΥC	
		: C T CORPORATION SYSTEM	\sim	
	Account Number	: FCA00000023	9	
	Phone	: (614)280-3338	***	
	Fax Number	: (954)208-0845	4	
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**Enter	the email addres	s for this business entity to be used for future	~	2
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Email Address:_

LLC REGISTERED AGENT RESIGNATION BHI THE CLUB 2 LLC

Certificate of Status	0	
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Estimated Charge	\$85.00	

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AM 10:

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

CT CORPORATION SYSTEM

hereby resigns as

Name of Registered Agent

Registered Agent for ____

BHI THE CLUB 2 LLC

Name of Limited Liability Company

L15000204583

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 $Stilled_2$

Signature of Resigning Agent

If signing on behalf of an entity:

Kimberly Laughrey

Typed or Printed Name

Assistant Secretary

Capacity

FILING FEES:

\$ 85.00

Active limited liability company Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company \$ 25.00

Make checks payable to Florida Department of State and mail to: **Division of Corporations** P.O. Box 6327 Taliahassee, FL 32314