

L16 000058319

(Requestor's Name)

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SECRETARY OF STATE
TALLAHASSEE, FL

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JAN 28 2020

Law Offices
Leonard & Morrison, P.A.
Suite 201-A
2817 E. Oakland Park Boulevard
Fort Lauderdale Florida 33306

WILLIAM F. LEONARD (1926-2005)
C. GLENN LEONARD

TELEPHONE (954) 566-0096
FAX (954) 566-6866
glenn@glennleonard.net

December 24, 2019

Department of State
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, Fl 32314

Re: 17/21 Lancers, LLC

Gentlemen:

I am submitting the following cover letters and forms filled and signed by the appropriate member or registered agents and a check in the amount of \$160.00 to cover all the forms::

1. Resignation of Registered Agent - \$85.00
2. Resignation of member and fee - \$25.00
3. New Registered Agent change - \$25.00
4. Articles of Amendment - \$25.00

Sincerely,



C. GLENN LEONARD
CGL/cb

Enclosures - noted above and check \$160.00

M:\WP51\CGL\LM\mann dept of state.wpd

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 17/21 Lancers LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L16000058319

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:

C. Glenn Leonard, Esq.

Name of Person

Leonard & Morrison, P.A.

Name of Firm/Company

2817 E Oakland Park Blvd, Suite 201-A

Address

Fort Lauderdale, Florida 33306

City/State and Zip Code

E-mail address: (to be used for future annual report notification)
C. Glenn Leonard (cglenn@leonardmorrison.com)

For further information concerning this matter, please call:

C. Glenn Leonard

9545660096

Name of Person

at

Area Code

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

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 provisions of section 605.0115, Florida Statutes, the undersigned,

David Mann

, hereby resigns as

Name of Registered Agent

Registered Agent for 17/21 Lancers, LLC

Name of Limited Liability Company

L16000058319

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:

Typed or Printed Name

Capacity

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SECRETARY OF STATE
TALLAHASSEE, FL

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