

L1600000 98335

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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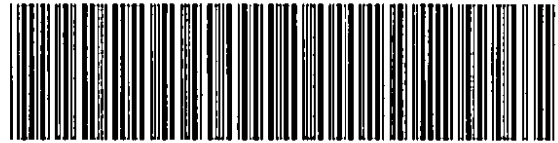
(Business Entity Name)

(Document Number)

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2019 OCT 28 AM 10:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Y SUIKER

NOV 12 2019

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

RUSSELL ALLEN

, hereby resigns as

Name of Registered Agent

Registered Agent for CARVEL YACHT SERVICES, LLC

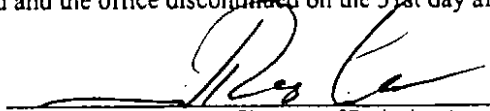
Name of Limited Liability Company

L16000098335

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:

RUSSELL ALLEN
Typed or Printed Name
OFFICER / MEMBER
Capacity

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SECRETARY OF STATE

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withdrawn limited liability company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