L16000120881

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COVER LETTER

SUBJECT: manatee manor, LLC	
Name of Limited Liability	Company
DOCUMENT NUMBER: L16000120881	
The enclosed Resignation of Registered Agent for a Limited for filing.	Liability Company and fee are submitted
Please return all correspondence concerning this matter to the	ne following:
United States Corporation Agents, Inc.	
Name of Person	
Legalzoom.com, Inc.	
Name of Firm/Company	
9900 Spectrum Dr.	
Address	
Austin, TX 78717	
City/State and Zip Code	
raresignations@legalzoom.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
at (773-0888
Name of Person 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

TO: Registration Section Division of Corporations

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

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ons of section 605.0115. Florida Statutes, the unde	rsigned,		
United States Corporation Agents, Inc. Name of Registered Agent		, hereby resigns as		
Registered Agent for	manatee manor, LLC			
	Name of Limited Liability Company		,	
L16000120881				
Document 8	Number, if known			
A copy of this resignat	ion was mailed to the above listed limited liability	company at its last known addre	SS.	
The agency is terminat	ed and the office discontinued on the 31st day afte	r the date on which this statemer	nt is til	led.
	Signature of Kessening Agent			
If signing on behalf of an entity:		SEC:	2022 AUG -	
	Cheyenne Moseley		200	77
	Typed or Printed Name	ents, Inc.	2	-
	Asst. Secretary for United States Corporation Ag	ents, Inc. ట్రామ్	A	17
	Capacity	——————————————————————————————————————	H 8: 36	O

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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

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