Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000416434 3)))



H2300041643434BC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : LEVINE & PARTNERS, P.A.

Account Number : 074677001117 Phone : (305)372-1350 Fax Number : (305)423-3206

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

			_	_							
Ξ	m	3 1	-1	Α	лл	•	Δ	c	c	٠	

LLC REGISTERED AGENT RESIGNATION FIRST GINGER, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

DEC 0 7 2023

K. Brumbley

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions	of section 605.0115, Florida Statutes, the und	lersigned,	
HANA MOUNAYYER	, hereby resigns as		
N	ame of Registered Agent	, neredy resigns as	
Registered Agent for FIRS	T GINGER LLC		_
	Name of Limited Liability Company		
L16000129849			
Document Numb	per, if known		
	was mailed to the above listed limited liability and the office discontinued on the 31st day after a Wayne and a	ter the date on which this statement	
_	Hana Mounayyer Signature of Weigning Agent	<u> </u>	
If signing on behalf of an e	entity:		7023 DEC
_	Typed or Printed Name		
-	Capacity	-	PH 1:51

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

Active limited liability company Administratively dissolved/ voluntarily dissolved/

withdrawn limited liability company

FILING FEES:

\$ 85.00 \$ 25.00