L16000169784

(Requestor's Name)		
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(Document Number)		
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FLORIDA DEPARTMENT OF STATE Division of Corporations

December 17, 2020

JOHN KILLIAN STUMPF, IV LIONFISH TAMER, LLC 638 VICKERS STREET SEBASTIAN, FL 32958

SUBJECT: LIONFISH TAMER, LLC

Ref. Number: L16000169784

See hed new please

Letter Number: 620A00025556

We have received your document and check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a FLORIDA CORPORATION, but your entity is a FLORIDA LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent Regulatory Specialist II

www.sunbiz.org

COVER LETTER

Division of Corporations
SUBJECT: LION FISH Tamer, LLC Name of Limited Liability Company DOCUMENT NUMBER: L16000169784
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:
Marie A. Duvall Name of Person
Name of Firm/Company
1913 Princess Court
Maples, Fa 34110 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Marie Duvall at (239) 777-0692 Name of Person at (239) 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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, Flor	ida Statutes, the undersigned,
Marie A. Duvall	, hereby resigns as
Name of Registered Agent	
Marie A. Duvail Name of Registered Agent Registered Agent for Lin Lish Tam	er, LLC
Name of Limited Lie	ability Company
L 16000 169784 Document Number, if known	
A copy of this resignation was mailed to the above l	listed limited liability company at its last known address.
mirie a	ture of Resigning Agent
If signing on behalf of an entity:	799
	Duvall Printed Name at / Managing Member Energy Printed Name 22 25 26 27 28 28

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