

L16000214407

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

2024 DEC 30 AM 7:38

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AB

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WALNUT STREET VENTURES, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L1600024407

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:

MARK SMITH
Name of Person

WALNUT STREET VENTURES, LLC
Name of Firm/Company

38 JUNIPER CT
Address

SANTA ROSA BEACH, FL 32159
City/State and Zip Code

KASHTYN@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARK SMITH at (817) 675-9131
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

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

2024 DEC 30 AM 7:38

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned, **SECRETARY OF STATE
TALLAHASSEE, FL**

KADEN SMITH

Name of Registered Agent

, hereby resigns as

Registered Agent for WALNUT STREET VENTURES, LLC

Name of Limited Liability Company

L16000214407

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.

Kaden Smith
Signature of Resigning Agent

If signing on behalf of an entity:

KADEN N. SMITH
Typed or Printed Name

AMBIR
Capacity

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withdrawn limited liability company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:
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P.O. Box 6327
Tallahassee, FL 32314

**STATEMENT OF RESIGNATION OF REGISTERED AGENT
FOR A LIMITED LIABILITY COMPANY**

FILED

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

KADEN SMITH
Name of Registered Agent

SECRETARY OF STATE
TALLAHASSEE, FL
, hereby resigns as

Registered Agent for WALNUT STREET VENTURES, LLC

Name of Limited Liability Company

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Document Number, if known

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Kaden Smith
Signature of Resigning Agent

If signing on behalf of an entity:

KADEN N. SMITH
Typed or Printed Name
AMBIR
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