

L17000101356

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number 1 (850)617-6380

From: Account Name : ESPOSITO LAW GROUP, P.A.
Account Number : I20140000041
Phone : (941)251-0000
Fax Number : (941)251-4044

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18 SEP 13 AM 10:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Email Address: joe@realtyjoe.com

RECEIVED
18 SEP 13 PM 1:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**REGISTERED AGENT RESIGNATION
JOSEPH S. ESPOSITO, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$87.50

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SEP 14 2018

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Joseph S. Esposito, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L17000101356

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:

Patrick G. Bryant

Name of Person

Esposito Law Group, P.A.

Name of Firm/Company

537 10th St W

Address

Bradenton, FL 34206

City/State and Zip Code

joe@realtysjoe.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Patrick Bryant

at 941 251-0000

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

INRS17 (2/14)

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

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

Esposito Law Group, P.A. _____, hereby resigns as

Name of Registered Agent

Registered Agent for Joseph S. Esposito, LLC

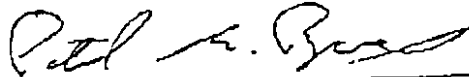
Name of Limited Liability Company

L17000101356

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:

Patrick G. Bryant

Typed or Printed Name

Vice President

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:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

INHS17 (2/14)

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