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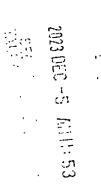
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Office Use Only



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Resignation of Registered Agent for a **Limited Liability Company**

Capitol Corporate Services, Inc.

PO Box 1831 Austin, TX 78767

Phone: (800) 345-4647 Fax: (800) 432-3622 regagent@capitoiservices com

Secretary of State **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

DATE: STATE:

11/28/2023 **FLORIDA**

REP UNIT:

FALCAO REAL ESTATE HOLDING

COMPANY, LLC

Enclosed for filing please find a Resignation of Registered Agent for a Limited Liability Company for the above referenced name, which is to be filed in your office. Enclosed is check # 33684 in the amount of \$25.00 for the filing fee. After filing, please return the file-stamped copy in the enclosed self-addressed envelope. If you have any questions please call (800) 345-4647 and ask for the Registered Agent Department.

Please return file-stamped copy to the following address:

Capitol Corporate Services, Inc. PO Box 1831 Austin, TX 78767



STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

| Pursuant to the provis | sions of section 605.0115, Florida Statutes, the undersigned. | |
|------------------------|---|--------------------------------|
| Capi | tol Corporate Services, Inc. hereby res | igns as |
| | Name of Registered Agent | |
| Registered Agent for | FALCAO REAL ESTATE HOLDING COM | IPANY, LLC |
| , | Name of the Limited Liability Company | |
| | 00197287 Number, if known | |
| A copy of this resigna | ation was mailed to the above listed limited liability company at | its last known address. |
| The agency is termina | nted and the office discontinued on the 31st day after the date or | which this statement is filed. |
| | Highature of Resigning Agent | 2023 DEC SECTOR |
| If signing on behalf o | I an entity: | |
| | Yvette Cleveland Typed or Printed Name | d d |
| | Assistant Secretary | |
| | Capacity | 55 55 56 57 |
| | FILING FEFS: \$ 85.00 Active limited liability company \$ 25.00 Administratively dissolved/voluntar | rily dissolved/ |

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

INHS17 (2/14)



Return Acknowledgement to:

Active limited liability company
Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company

Capitol Corporate Services, Inc. PO Box 1831 Austin, TX 78767 800.345.4647