

L18000043739

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: HICKORY LANE LLC  
Name of Limited Liability Company

DOCUMENT NUMBER: L18000043739

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:

MATTHEW J. TYNER  
Name of Person

\_\_\_\_\_  
Name of Firm/Company

449 CHINAMUK CT.  
Address

APPOKA, FL 32712  
City/State and Zip Code

APRMAT@EMMATHLINK.NET  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JAMIE POWELL at ( 407 ) 509-8493  
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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

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

MATTHEW J. TYNER

Name of Registered Agent

, hereby resigns as

Registered Agent for

HICKORY LAKE LLC

Name of Limited Liability Company

L18000043739

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:

Typed or Printed Name

Capacity

2018 JUL 16 PM 4:03  
ALL INFORMATION CONTAINED  
HEREIN IS UNCLASSIFIED  
DATE 11-15-2018 BY 60322

### 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\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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