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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : KOUTOULAS & RELIS, LLC

Account Number : I20070000005 : (954)332-1345 Phone Fax Number : (954)332-1346

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

Email Address:_

LLC REGISTERED AGENT RESIGNATION BHTL HOLDINGS LLC

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Fox Audit #4190003286443

COVER LETTER

TO: Registration Section Division of Corporations		.,
SUBJECT: BHTL Holdings LLC	me of Limited Liability	Company,
		Company
DOCUMENT NUMBER: L1800006		
The enclosed Resignation of Registere for filing.	d Agent for a Limited	Liability Company and fee are submitted
Please return all correspondence conce	erning this matter to the	e following:
Steven Relis CPA		
Name of Person		
Koutoulas & Relis LLC		
Name of Firm/Comp	any	
1776 N Pine Island Road Ste 316		
Address		
Plantation FL 33322		
City/State and Zip Co	ode	
E-mail address: (to be used for future an	nual report notification)	
For further information concerning thi	is matter, please call:	
Steven Rells CPA	at (at Code	332-1345 Daytime Telephone Number
Name of Person	Area Code	Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$65.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

INHS17 (2/14)

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ions of section 605.0115, Florida Statutes, the unc	lersigned,	
Koutoulas & Relis LLC Name of Registered Agent		, hereby resigns as	
	Name of Limited Liability Company		
L18000065697			
Document	Number, if known		
	tion was mailed to the above listed limited liabilit	7 7	
The agency is terimina	sted and the office discontinued on the 31st day af		
If signing on behalf of	f an entity:	The second secon	
	Steven L Relis		
	Typed or Printed Name Partner in Koutoulas & Relis LLC		
	Capecity		

FILING FEES: \$ 85.00 Active \$ 25.00 Admi Active limited liability company
Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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 Tallahasseo, FL 32314

INHS17 (2/14)