

Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

L18000086770

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000123590 3)))



H220001235903ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:
 Division of Corporations
 Fax Number : (850)617-6383

From:
 Account Name : BEGGS & LANE
 Account Number : I20020000155
 Phone : (850)432-2451
 Fax Number : (850)469-3331

****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
LAZY DAYS WATERSPORTS, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

2022 APR -5 PM 1:28

STATE OF FLORIDA
 FALL AND STATE
 FILED

2022 MAR -5 AM 11:30

FILED

Electronic Filing Menu Corporate Filing Menu

APR - 6 2022
 T. LEMIEUX

((H22000123590 3))

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lazy Days Watersports, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L18000086770

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:

Robert L. Jones, III
Name of Person

Beggs & Lane, RLLP
Name of Firm/Company

501 Commendancia Street
Address

Pensacola, FL 32502
City/State and Zip Code

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

For further information concerning this matter, please call:

Robert L. Jones, III at (850) 432-2451
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

INHS17 (2/14)

((H22000123590 3))

((H22000123590 3)))

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

Robert L. Jones, III

Name of Registered Agent

, hereby resigns as

Registered Agent for Lazy Days Watersports, LLC

Name of Limited Liability Company

L18000086770

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

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

FILED
2022 MAR -5 AM 11:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

INHS17 (2/14)

((H22000123590 3)))