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)))



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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:					
Emgit	Auul C33.					

LLC REGISTERED AGENT RESIGNATION LAZY DAYS WATERSPORTS, LLC

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

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HG 202 9 - 89A T. LEMIEUX (((H22000123590 3)))

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Lazy Days Watersports, L	LC	
	Name of Limited Liabi	lity Company
DOCUMENT NUMBER: L18000	086770	
The enclosed Resignation of Register filing.	stered Agent for a Limi	ited Liability Company and fee are submitted
Please return all correspondence c	oncerning this matter to	o the following:
Robert L. Jones, III		
Name of Per	son	- <u>-</u>
Boggs & Lane, RLLP		
Name of Firm/C	ompany	
501 Commendencia Street		
Address		
Pensacola, FL 32502		
City/State and 7.	ip Code	
		
E-mail address: (to be used for fitte	ire annuai report notification	1)
For further information concerning	g this matter, please ca	1):
Robert L. Jones, III	850 at (432-2451
Name of Person	Àrea Co	ode 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 Tallahassec 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

INHS17 (2/14)

(((H220001235903)))

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisio	ns of section 605.011:	5, Florida Statutes, the unde	ersigned,	
Robert L. Jones, III			, hereby resigns as	
	Name of Registered Age	nt	, , norody resigns as	
Registered Agent for $\frac{L\epsilon}{\epsilon}$	azy Days Watersports, I	LLC	~	
	Name of Lim	nited Liability Company		,
L18000086770				
Document No	ımber, if known			
A copy of this resignation	on was mailed to the a	above (isted limited liability	company at its last known a	iddress.
The agency is terminate	ed and the office disco	ntinued on the 31st day after	er the date on which this state	ement is filed.
		<i>[]</i>	-	
		Signature of Resigning Agent	<u>. </u>	
If signing on behalf of a		yped or Printed Name		
		Capacity		
		FEES: Active limited liability of Administratively dissolve withdrawn limited liability of the Florida Department of Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		FILED 2022 MAR - 5 AM II: 30
INHS17 (2/14)				