

12/26/2019

Division of Corporations

L19000051773

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

(((H19000370188 3)))



H190003701883ABC4

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 : KOUTOULAS & RELIS, LLC
Account Number : I20070000005
Phone : (954)332-1345
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
CACIQUE WIRELESS LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$85.00

DEC 27 2019

M. SOLOMON

Electronic Filing Menu

Corporate Filing Menu

Help

2019 DEC 26 PM 4:43

2019 DEC 26 AM 11:01

FILED

Fax Audit # H170005 101883

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Cacique Wireless LLC

Name of Limited Liability Company

DOCUMENT NUMBER: L19000051773

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:

Name of Person

Koutoulas & Relis, LLC

Name of Firm/Company

1776 N Pine Island Road Ste 316

Address

Plantation, FL 33322

City/State and Zip Code

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

For further information concerning this matter, please call:

Koutoulas & Relis LLC

at (954) 332-1345

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

2019 DEC 26 AM 11:01

FILED

Fax Audit # H190005 N1883

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

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

Jesus Dario Catalani

, hereby resigns as

Name of Registered Agent

Registered Agent for Cacique Wireless LLC

Name of Limited Liability Company

L19000051773

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

2019 DEC 26 AM 11:01

FILED