L19000188396

(Re	equestor's Name)				
(Address)					
(Ad	ldress)				
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates of Status				
Special Instructions to Filing Officer:					





900352072829

09/18/20~-01018--011 **85.00

JU 10/23/20

2020 SEP 18 AH 10: 34
SECRETARY OF STATE



2804 Gateway Oaks Drive #100 Sacramento, CA 95833

Phone 888-272-3725 Fax 800-603-5868

REFERENCE # MUST BE ON INVOICE TO BE PAID

Date:

September 10, 2020

Vendor#

H1080

TO:

Florida Department of State

New Filing Section - Division of Corporations

PO Box 6327

Tallahassee, FL 32314

FAX:

EMAIL:

AE:

Cori Ann Crosthwaite

Email:

ccrosthwaite@myparacorp.co

m

Ref Number:

1487201

NAME: DEKD PROPERTIES LLC

REGISTERED AGENT RESIGNATION FILING

State

FL

SPECIAL INSTRUCTIONS:

Requesting 1 plain copy

PLEASE EMAIL OR FAX A COPY OF RESULTS

Please return via: Regular Mail

RETURN TO: PARASEC - 2804 GATEWAY OAKS DRIVE #100 SACRAMENTO, CA 95833

CALL IMMEDIATELY IF YOU HAVE ANY QUESTIONS OR THE DEADLINE WILL NOT BE MET

888-272-3725

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ns of section 605.0115	, Florida Statutes, the u	ndersigned,			
Rocket Lawyer Corp	oorate Services LI	LC	, hereby resigns as			
	Name of Registered Agent	i	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Registered Agent for Di	EKD PROPERTIE	SLLC				
<u> </u>	Name of Limi	ted Liability Company				
L19000188396						
Document Nu	mber, if known					
A copy of this resignatio	on was mailed to the al	bove listed limited liabi	lity company at its last l	known address.		
The agency is terminated	and the office discor	Signature of Resigning Age		this statement is	filed.	
If signing on behalf of a	n entity:				~3	
	EDNA PERRY				100 SEP 18	
	Ту	ped or Printed Name			<u> </u>	•
	Asst. Secretary F	Rocket Lawyer Corp	porate Servi			<u>-</u>
	FILING \$ 85.00 \$ 25.00	Active limited liability	olved/voluntarily disse	Y OF STATE	AT 0: 34	7

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314