

L19000198741

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

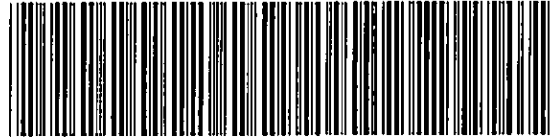
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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FILED
2023 FEB 27 AM 9:46
STATE
ALABAMA, FL

RECEIVED
2023 FEB 27 PM 3:26
ALABAMA, FL

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312

(850) 656-4724

DATE 02/27/2023

****WALK IN****

ENTITY NAME MAHOGANY RUN LLC

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

XXXXXX

Plain Copy

Certified Copy

Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments

Certificate of Good Standing

****APOSTILLE / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$85

ACCOUNT #: I20160000072

E B JW

Please call Tina at the above number for any issues or concerns. Thank you so much!

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MAHOGANY RUN LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L19000198741

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:

Tsvi Goldstein

Name of Person

PLATINUM AGENT SERVICES LLC

Name of Firm/Company

155 OFFICE PLAZA DR.

Address

TALLAHASSEE, FL 32301

City/State and Zip Code

agent@platinumfilings.com

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

For further information concerning this matter, please call:

Tsvi Goldstein

Name of Person

at (800)

Area Code

263-1558

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

PLATINUM AGENT SERVICES LLC

, hereby resigns as

Name of Registered Agent

Registered Agent for MAHOGANY RUN LLC

Name of Limited Liability Company

L19000198741

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.

/s/ Steven Friedman

Signature of Resigning Agent

If signing on behalf of an entity:

Steven Friedman

Typed or Printed Name

President

Capacity

FILED
2023 FEB 27 AM 9:46
CLERK OF STATE
TALLAHASSEE, FL

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