

# Florida Department of State

## Division of Corporations Electronic Filing Cover Sheet

L19000229066

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

From:  
Account Name : EXPAT CONSULTING CORP.  
Account Number : I20190000096  
Phone : (407)745-1112  
Fax Number : (407)641-8083

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: ACC@EXPATCONSULTING.COM

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### LLC REGISTERED AGENT RESIGNATION RAGAMI INVESTMENTS LLC

Certificate of Status	0
Certified Copy	0
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M. SOLOMON  
DEC - 5 2024

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** RAGAMI INVESTMENTS LLC

\_\_\_\_\_  
Name of Limited Liability Company

**DOCUMENT NUMBER:** L19000229066

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:

NILTON FREGNI

\_\_\_\_\_  
Name of Person

EXPAT CONSULTING CORP

\_\_\_\_\_  
Name of Firm/Company

8615 COMMODITY CIR, STE 11

\_\_\_\_\_  
Address

ORLANDO - FL - 32819

\_\_\_\_\_  
City/State and Zip Code

ACC@EXPATCONSULTING.COM

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

For further information concerning this matter, please call:

NILTON FREGNI

\_\_\_\_\_  
Name of Person

at (407) 745.1112  
\_\_\_\_\_  
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

FILED  
2024 DEC -4 PM 4:27  
CLERK OF COURT  
JANICE M. GRIFFIN

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

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

EXPAT CONSULTING CORP

, hereby resigns as

Name of Registered Agent

Registered Agent for RAGAMI INVESTMENTS LLC

Name of Limited Liability Company

L19000229066

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:

NILTON FREGNI

Typed or Printed Name

P

Capacity

FILED  
2024 DEC -4 PM 4:27  
STATE  
FLORIDA  
TALLAHASSEE

### 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