

h20 0000 34741

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

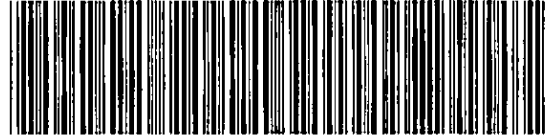
(Business Entity Name)

(Document Number)

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2021 SEP 27 PM 2:17  
CLERK OF STATE  
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

9/23/21  
2021 SEP 27  
Returned  
10/15/21  
Returned  
you have

September 14, 2021

MICHAEL C KLASFED, PA.  
2424 NE 22ND STREET  
POMPANO BEACH, FL 33062

SUBJECT: FIRST ROYALTY RELIEF, LLC  
Ref. Number: L20000034741

We have received your document for FIRST ROYALTY RELIEF, LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s). ✓

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Yasemin Y Sulker  
Regulatory Specialist III

Letter Number: 921A00022145

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** FIRST ROYALTY RELIEF, LLC  
Name of Limited Liability Company

**DOCUMENT NUMBER:** L20000034741

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:

Michael C. Klasfeld  
Name of Person

Michael C. Klasfeld, P.A.  
Name of Firm/Company

2424 N.E. 22nd Street  
Address  
Pompano Beach, FL 33062  
(954) 781-8000  
City/State and Zip Code

wayro70@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Wayne Royal at ( 954 ) 592-9927  
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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

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

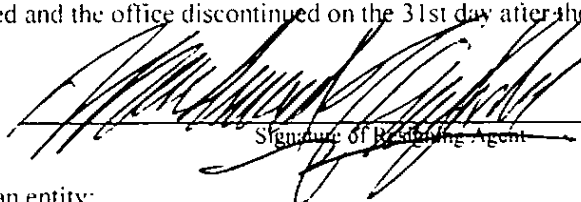
Michael C. Klasfeld, P.A. hereby resigns as  
Name of Registered Agent

Registered Agent for FIRST ROYAL RELIEF, LLC  
Name of Limited Liability Company

L20000034741  
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:

Michael C. Klasfeld  
Typed or Printed Name  
President  
Capacity

SECRETARY OF STATE  
TALLAHASSEE, FL

2021 SEP 27 PM 2:17

FILED

### **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