120000007223

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(expectable, none of
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to Fining Officer.
<u> </u>





800364775888

RECEIVED

APR 3 0 2021

ng/ng/21--01003--008 **\$9.05





Sivyer Barlow & Watson, P.A.

ATTORNEYS AT LAW

MARLON H. BARLOW, HI

R.J. HAUGHEY, II

J. DEREK KANTASKAS

ALI MIRGHAHARI

NEAL A. SIVYER

PAUL D. WATSON

ALICIA WHITING-BOZICH

TRUIST PLACE 401 E. JACKSON STREET **SUITE 2225** TAMPA, FL 33602 (813) 221-4242

Fax: (813) 227-8598

www.sbwlegal.com

OF COUNSEL

GAIL M. ABERCROMBIE

DAVID S. WATSON

JACQUELINE T. CARRICATO

SENDER'S EMAIL: dkantaskas@sbwlegal.com

April 28, 2021

Via U.S. Mail:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

> International Development Associates, LLC – Resignation of Registered Agent Re:

Dear Sir or Madam:

Enclosed please find the following:

1. International Development Associates, LLC's Resignation of Registered Agent for a Limited Liability Company, along with a check in the amount of \$85.00 (Check No. 16580).

Should you have any questions regarding the above, please do not hesitate to contact me or my paralegal, Marie Kosmos, directly at 813-574-6706.

Sincerely.

J. Derek Kantaskas

Enclosure

COVER LETTER

TO: Registration Section Division of Corporations

International Development Associates, LLC SUBJECT:		
Name of Limited Liability Company		
DOCUMENT NUMBER: 1.20000072273		
The enclosed Resignation of Registered Agent for a Limited for filing.	1 Liability Company and fee are submitted	
Please return all correspondence concerning this matter to the	he following:	
Jason G. Woods		
Name of Person	•	
Name of Firm/Company		
100 S. Ashley Drive S. #600		
Address		
Fampa, FL 33602		
City/State and Zip Code		
jasonīg,sai-us net		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Jason Woods Name of Person Area Code	999-4106 Daytine Telephone Number	
Name of Person Area Code	Daytime Tetephone 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

INHS17 (2/14)

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,		
J. Derek Kantaskas, Esq.	, hereby resigns as	
Name of Registered Agent	,, <u>,</u>	
Registered Agent for International Development Associates, ELC		
Name of Limited Liability Company	·	
1.2000XX72273		
Document Number, if known		
A copy of this resignation was mailed to the above listed limited liab	pility company at its last known address.	
The agency is terminated and the office discontinued on the 31st day		
It signing on behalf of an entity: J. DEREK KANTP Registered Agent Capacity	ISKAS	

FILING FEES:
\$ \$5.00 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

INHS17 (2/14)

2021 APR 30 AM 9: 24