

L20000169 ZSZ

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

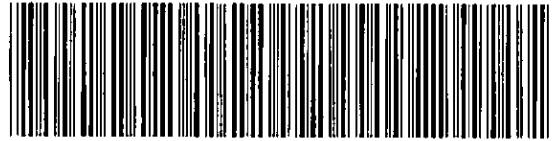
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200439038382

11/05/24--01019--022 \*\*87.50

FILED

2024 NOV -5 AM 11:11

SECRETARY OF STATE  
TALLAHASSEE, FL

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** FOUNDERS LAKELAND, LLC  
Name of Limited Liability Company

**DOCUMENT NUMBER:** L20000169252

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:

KIRK BORADBROOKS

Name of Person

Name of Firm/Company

4408 WHITBY LAND

Address

CHARLOTTE, NC 28211

City/State and Zip Code

kirk@foundershospitality.com

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

For further information concerning this matter, please call:

KIRK BROADBROOKS

at ( 980 ) 263-4614

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

FILED  
2024 NOV -5 AM 11:11  
SECRETARY OF STATE  
TALLAHASSEE, FL

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

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

John B. (Bart) Allen

\_\_\_\_\_  
Name of Registered Agent

, hereby resigns as

Registered Agent for FOUNDERS LAKE LAND, LLC

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

L20000169252

\_\_\_\_\_  
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]  
Signature of Resigning Agent

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

\_\_\_\_\_  
Capacity

FILED  
2024 NOV -5 AM 11:11  
SECRETARY 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

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

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

John B. (Bart) Allen

\_\_\_\_\_  
Name of Registered Agent

, hereby resigns as

Registered Agent for FOUNDERS LAKE LAND, LLC

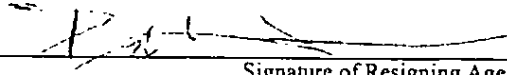
\_\_\_\_\_  
Name of Limited Liability Company

L20000169252

\_\_\_\_\_  
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:

\_\_\_\_\_  
Typed or Printed Name

\_\_\_\_\_  
Capacity

**FILED**  
2024 NOV -5 AM 11:11  
SECRETARY 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**