# L20 000218221

| (Requestor's Name)                      |                |                        |  |  |  |
|---|----------------|------------------------|--|--|--|
| (Ad                                     | dress)         |                        |  |  |  |
| (Address)                               |                |                        |  |  |  |
| (City/State/Zip/Phone #)                |                |                        |  |  |  |
| PICK-UP                                 | _              | MAIL                   |  |  |  |
| (Business Entity Name)                  |                |                        |  |  |  |
| (Document Number)                       |                |                        |  |  |  |
| Certified Copies                        | _ Certificates | Certificates of Status |  |  |  |
| Special Instructions to Filing Officer: |                |                        |  |  |  |
|   |                |                        |  |  |  |
|   |                |                        |  |  |  |
|   |                |                        |  |  |  |
|   |                |                        |  |  |  |

Office Use Only



900393287799







### **COVER LETTER**





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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Name of Person

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

#### STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO:

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

| Pursuant to the provisio              | ons of section 605.0115, Florida Statutes, the unders                   | signed,              |               |             |                       |
|---------------------------------------|---|----------------------|---------------|-------------|-----------------------|
| United States Corporation Agents, Inc |   | hereby resions as    | ione ne       |             |                       |
|                                       |   | nereoy reargina as   |               |             |                       |
| Registered Agent for                  | INR Real Investment LLC   |                      |               |             | -                     |
|                                       | Name of Limited Liability Company                                       | <del></del>          |               |             |                       |
| L20000218221                          |   |                      |               |             |                       |
| Document No                           | umber, if known   |                      |               |             |                       |
| A copy of this resignation            | on was mailed to the above listed limited liability o                   | ompany at its last l | known a       | ddress.     |                       |
| The agency is terminate               | d and the office discontinued on the 31st day after                     | the date on which t  | this state    |             | filed.                |
| If signing on behalf of an entity:    |   |                      |               | 2 A!        | <del>نتنا</del>       |
| Cheyenne Moseley                      |   |                      | •             | 2072 AUG 29 | دد.<br>درست.<br>چ څ ټ |
|                                       | Typed or Printed Name Asst. Secretary for United States Corporation Age | nts, Inc.            | ;<br>;<br>; - | PH          | ; <b>L</b>            |
|                                       | Capacity  |                      |               | կ։ 24       |                       |

Make checks payable to Florida Department of State and mail to: Division of Corporations P.O. Box 6327

Active limited liability company
Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company

**FILING FEES:** 

\$ 85.00 \$ 25.00

Tallahassee, FL 32314