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COVER LETTER

Division of Corporations

LATARON INVESTMENTS LLC

Name of Limited Liability Company

DOCUMENT NUMBER: L20000280509

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:

Chelsea Chapman

Name of Person

Legaline Corporate Services, INC.

Name of Firm/Company

10601 Clarence Dr Ste 250

Address

City/State and Zip Code
ra@legalinc.com

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

For further information concerning this matter, please call:

Chelsea Chapman at (844) 386-0178

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Frisco, TX 75033-3867

TO: Registration Section

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 prov	isions of section 605.0115, Florida Statutes, the undersign	ned,
Legaline Corporate S	ervices, INC.	reby resigns as
Name of Registered Agent		Soly realigned and
Registered Agent fo	LATARON INVESTMENTS LLC	
	Name of Limited Liability Company	<u> </u>
L20000280509		
Documer	nt Number, if known	
A copy of this resign	nation was mailed to the above listed limited liability com	pany at its last known address.
The agency is termin	nated and the office discontinued on the 31st day after the	date on which this statement is filed.
	Mubea Mayana Signature of Resigning Agent	217
If signing on behalf	of an entity:	
	Chelsea Chapman	THE STATE OF THE S
	Typed or Printed Name	PH 12:
	On Behalf of Legaline Corporate Services, INC.	<u> </u>
	Capacity	— 四至 红

Make checks payable to Florida Department of State and mail to: **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

O \$ 85.00 O \$ 25.00

FILING FEES:

\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company