

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**L21 000164928**

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Fax Number : (850) 617-6383

From: Account Name : TRENAM, KEMKER, SCHARF, BARKIN, FRYE, O'NEILL & MULLIS,  
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P.A.

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

**Email Address:** cathyconnell1975@yahoo.com

**LLC REGISTERED AGENT RESIGNATION  
LACON REALTY, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$85.00

2022 JAN 18 PM 12:35

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

2022 JAN 18 AM 7:30  
SECRETARY OF STATE  
MAIL ROOM

APPROVED  
AND  
FILED

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

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

TK Registered Agent, Inc.

, hereby resigns as

Name of Registered Agent

Registered Agent for LaCon Realty, LLC


Name of Limited Liability Company

L21000164928

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:

TK Registered Agent, Inc.

Typed or Printed Name

Attorney

Capacity

**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withdrawn limited liability company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

INHS17 (2/14)

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