

L21000 221 482

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

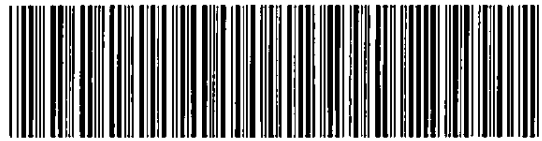
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

Inactive
\$25

TO: Registration Section
Division of Corporations

SUBJECT: A.G.C. Holdings NJ, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L21000221482

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:

Elizabeth D. Barron

Name of Person

Ausley McMullen

Name of Firm/Company

123 S. Calhoun Street

Address

Tallahassee, FL 32301

City/State and Zip Code

antonio@benficadg.com

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

For further information concerning this matter, please call:

Beth Dyal

at (850) 425-5319

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

SECRET
TALLAHASSEE
2021 APR -4 PM 1:59
F-11-11-11

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

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

Ausley & McMullen, P.A.

Name of Registered Agent

, hereby resigns as

Registered Agent for A.G.C. Holdings NJ, LLC

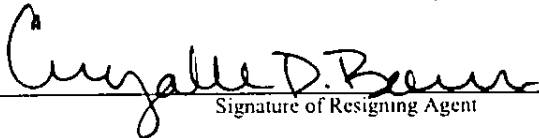
Name of Limited Liability Company

L21000221482

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:

Elizabeth D. Barron, Esq.

Typed or Printed Name

Shareholder of Ausley & McMullen, P.A.

Capacity

FILING FEES:

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\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

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P.O. Box 6327
Tallahassee, FL 32314

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TALLAHASSEE, FL

COVER LETTER

Inactive
#25

TO: Registration Section
Division of Corporations

SUBJECT: T Holdings, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L21000157549

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:

Elizabeth D. Barron

Name of Person

Ausley McMullen

Name of Firm/Company

123 S. Calhoun Street

Address

Tallahassee, FL 32301

City/State and Zip Code

antonio@benficadg.com

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

For further information concerning this matter, please call:

Beth Dyal at (850) 425-5319
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.

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Tallahassee, FL 32303

2024 APR -4 PM 1:59
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,

Ausley & McMullen, P.A.

Name of Registered Agent

, hereby resigns as

Registered Agent for T Holdings, LLC

Name of Limited Liability Company

L21000157549

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:

Elizabeth D. Barron, Esq.

Typed or Printed Name

Shareholder of Ausley & McMullen, P.A.

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:
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Tallahassee, FL 32314

2024 APR -4 PM 2:00
SECRETARY OF STATE
TALLAHASSEE, FL

FILED