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To:

Division of Corporations
Fax Number : (850)617-6383

From: W. Scott Turnbull, Esquire
Account Name : CRARY, BUCHANAN, BONDISH, ET AL
Account Number : 076424001425
Phone : (772)233-4602
Fax Number : (772)223-4378

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

Email Address: nig.gies@call1place.com

LLC REGISTERED AGENT RESIGNATION
DREAMWAY SERVICES PLUS LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$85.00

2022 FEB 25 PM 3:49

1. The first group of people who are not in the labor force are those who are not in the labor force because they are not in the labor force.

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T. LEMIEUX
FEB 28 2022

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STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

Tina M. Tillman _____, hereby resigns as

Name of Registered Agent

Registered Agent for DREAMWAY SERVICES PLUS LLC

Name of Limited Liability Company

1.21000248767

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.

Tina M. Tillman

Signature of Resigning Agent

If signing on behalf of an entity:

Tina M. Tillman

Typed or Printed Name

Member

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withdrawn limited liability company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