

121000269008

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

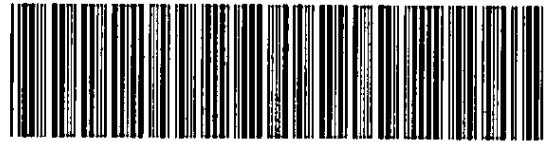
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2022 MAY 10 PM 3:15  
STATE OF NEW YORK  
SECRETARY OF STATE

FILED

JUN 30 2022

M. SOLOMON

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Draper Townhomes, LLC

\_\_\_\_\_  
Name of Limited Liability Company

**DOCUMENT NUMBER:** L21000269008

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:

Darell Pierce

\_\_\_\_\_  
Name of Person

Draper Townhomes LLC

\_\_\_\_\_  
Name of Firm/Company

PO Box 1134

\_\_\_\_\_  
Address

Bowling Green, KY 42102

\_\_\_\_\_  
City/State and Zip Code

drpierce@pierceahdshadoan.com

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

For further information concerning this matter, please call:

Darell Pierce

at ( 270 ) 792-7309

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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

FILED  
2022 MAY 10 PM 3:15  
TALLAHASSEE, FL  
DIVISION OF CORPORATIONS

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

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

Walsh Development Group, LLC

\_\_\_\_\_, hereby resigns as  
Name of Registered Agent

Registered Agent for Draper Townhomes, LLC

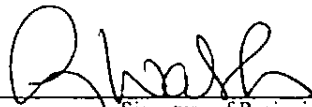
\_\_\_\_\_  
Name of Limited Liability Company

L21000269008

\_\_\_\_\_  
Document Number, if known

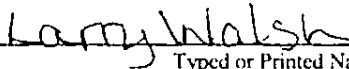
A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

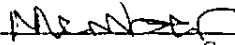


\_\_\_\_\_  
Signature of Resigning Agent

If signing on behalf of an entity:



\_\_\_\_\_  
Typed or Printed Name



\_\_\_\_\_  
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

2022 MAY 10 PM 3:15  
FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

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