

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L21000437575

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To:

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

From:

Account Name : WESTON CORPORATE ADMINISTRATION, LLC
Account Number : I20090000072
Phone : (954)356-2905
Fax Number : (954)337-8346

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FLORIDA
DIVISION OF CORPORATIONS
STATE

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

Email Address: _____

LLC REGISTERED AGENT RESIGNATION GLENDOWER LLC

Certificate of Status	0
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Estimated Charge	\$25.00

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SEP 30 2023

K. Brumley

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GLENDOWER LLC

Name of Limited Liability Company

DOCUMENT NUMBER: L21000437575

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:

JACQUELINE RODRIGUEZ

Name of Person

WESTON CORPORATE ADMINISTRATION LLC

Name of Firm/Company

1820 N CORPORATE LAKES BLVD SUITE 307

Address

WESTON FL 33326

City/State and Zip Code

CLIENTINFO@CPASWESTON.COM

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

For further information concerning this matter, please call:

JACQUELINE RODRIGUEZ

954

278-8041

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

WESTON CORPORATE ADMINISTRATION LLC

Name of Registered Agent

, hereby resigns as

Registered Agent for GLENDOWER LLC

Name of Limited Liability Company

L21000437575

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.

Joseph Blum
Signature of Resigning Agent

If signing on behalf of an entity:

WESTON CORPORATE ADMINISTRATION LLC

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

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AND
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TALLAHASSEE, FLORIDA
CLERK OF THE DIVISION OF CORPORATIONS