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2022 NOV | 4 PM 5: 2

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COVER LETTER

SUBJECT: <u>S FL RE INVESTMENTS L</u> Name	A.C. of Limited Liability	· Company
DOCUMENT NUMBER: <u>1.2100048025</u>	7	
The enclosed Resignation of Registered A for filing.	gent for a Limited	I Liability Company and fee are submitted
Please return all correspondence concerni	ng this matter to t	he following:
Chelsea Chapman		
Name of Person		-
Legaline Corporate Services, INC.		
Name of Firm/Company		-
10601 Clarence Dr Ste 250		
Address	, <u>, , , , , , , , , , , , , , , , , , </u>	_
Frisco, TX 75033-3867		
City/State and Zip Code		-
ra@legalinc.com		
E-mail address: (to be used for future annual	report notification)	-
For further information concerning this m	atter, please call:	
Chelsea Chapman	844 at (386-0178
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Registration Section Division of Corporations

TO:

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

Legaline Corporate Servi		Florida Statutes, the und	ersigned.			
	ces, INC.		, hereby resigns as			
	g					
Registered Agent for S	FL RE INVESTME	NTS, LLC				_
	Name of Limi	ted Liability Company			<u>, </u>	_
L21000480257	imber, it known					
rocaniene so	innoci, ii kucwii					
A copy of this resignation	on was mailed to the ab	ove listed limited liability	y company at its last kno	own ac	ldress.	
The agency is terminated	d and the office discon	tinued on the 31st day aft	er the date on which this	s state	ment is	; filed.
		Signature of Resigning Agent				
If signing on behalf of a	n entity:	Signature of Resigning Agent		SE E	2027	
If signing on behalf of a		Signature of Resigning Agent		SEORS	2022 NO	
If signing on behalf of a	Z.	Signature of Resigning Agent achary Mathewson ped or Printed Name		SECKEL	2022 NOV 1	24:14 41
If signing on behalf of a	Z			SECKCH	2022 NOV 1 4	
If signing on behalf of a	Z	ped or Printed Name		SECKED TO AND SECKED TO THE SE	2022 NOV 14 PM 5: 24	1

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314