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COVER LETTER

TRO: Registration Section Division of Corporations

SUBJECT: FIRST CHOICE REALTY & INVESTMENT (Name of Limited Liability	GROUP LLC Company
DOCUMENT NUMBER: <u>1.21000482285</u>	
The enclosed Resignation of Registered Agent for a Limited for filing.	Liability Company and fee are submitted
Please return all correspondence concerning this matter to the	ne following:
Chelsea Chapman	
Name of Person	
Legaline Corporate Services, INC.	
Name of Firm/Company	•
10601 Clarence Dr Ste 250	
Address	•
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 matter, 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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 6	05.0115, Florida Statutes, the undersigned.		
Legaline Corporate Services, INC.	, hereby i	, hereby resigns as	
Name of Regist	oy rungin us		
Registered Agent for FIRST CHOIC	CE REALTY & INVESTMENT GROUI	PLLC	
Nan	ne of Limited Liability Company	<u> </u>	
J_21000482285			
	to the above listed limited liability company a		
The agency is terminated and the offic	e discontinued on the 31st day after the date of Signature of Resigning Agent	-	
If signing on behalf of an entity:		ZOZZ NOV 14 SECINALIANA	
	Zachary Mathewson	The state of the s	
	Typed or Printed Name	س د سیس	
On Behalf of	Legaline Corporate Services, INC.		
	Capacity	5: 2	

FILING FEES:

S 85.00 Active limited liability company
S 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

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Make checks payable to Florida Department of State and mail to: **Division of Corporations** P.O. Box 6327 Tallahassee, F1, 32314