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Florida Department of State

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(((H22000286537 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

Account Name: NORTON, HAMMERSLEY, LOPEZ & SKOKOS, P.A.

Account Number: 120010000202 Phone : (941)954-4691 Fax Number : (941)954-2128

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

CORPORATION WHILSLAW COM

Email Address: LLC REGISTERED AGENT RESIGNATION BAUHAUS DEVELOPMENTS LLC Certificate of Status Certified Copy 0 Page Count 01 \$85.00 Estimated Charge

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August 25, 2022

FLORIDA DEPARTMENT OF STATE

Division of Corporations

BAUHAUS DEVELOPMENTS LLC 2100 CONSTITUTION BLVD - STE. 110 SARASOTA, FL 34231

SUBJECT: BAUHAUS DEVELOPMENTS LLC

REF: L21000517715

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The form submitted is outdated. Please use the updated form under the current statute of 605.

If you have any further questions concerning your document, please call (850) 245-6051.

KYLE D BRUMBLEY FAX Aud. #: H22000286537

Regulatory Specialist II Supervisor Letter Number: 022A00018957

Registration Section

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H22000 286537

COVER LETTER

TO: Registration Section Division of Corporations		•
BAUHAUS DEVELOPMENTS LLC SUBJECT:	2	
Name of	Limited Liabili	y Company
DOCUMENT NUMBER: L21000517715		
The enclosed Resignation of Registered Agree for filing.	ent for a Limit	ed Liability Company and fee are submitted
Please return all correspondence concerning	this matter to	the following:
Christopher J. Fowler, Esq.		
Name of Person	· ·=	_
Norton, Hammersley, Lopez & Skokos, P.A.		•
Name of Firm/Company	· · 	_
1819 Main Street, Suite 610		
Address		_
Sarasota, FL 34236		
City/State and Zip Code		_
sbianchi@bauhaus-developments.com		
E-mail address: (to be used for future annual re	port notification)	_
For further information concerning this man	ter, please call:	
Christopher J. Fowler, Esq.	941 at (954-4691
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 605.011	5, Florida Statules, the undersigned,
RAFFAELE MONTONE	, hereby resigns as
Name of Registered Age	
Registered Agent for BAUHAUS DEVELOP	MENTS LLC
Name of Lin	nited Liability Company
L21000517715	
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 disco	Signatured on the 31st day after the date on which this statement is filed. Signature of Resigning Agent
	Typed or Printed Name
FILING	
\$ 85.00 \$ 25.00	Active limited liability company 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