

L220000027698

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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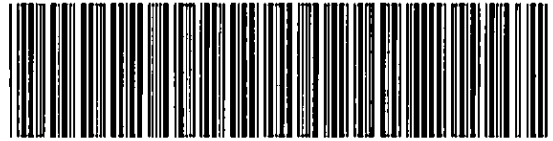
(Business Entity Name)

(Document Number)

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RA Resignation

FEB 28 2023

D CUSHING

TURNER & LYNN, P.A.
ATTORNEYS AT LAW

Vernon W. Turner (1917-2000)
Sandra T. Lynn
John Michael Lynn

7 Barracuda Lane
Key Largo, FL 33037
Telephone: (305) 367-0911
Fax: (305) 367-0915

November 28, 2022

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: JEB Family Group, LLC
Document Number: L22000027698

To whom it may concern:

Please find enclosed check #16921 from the Turner & Lynn, P.A. fee account, in the amount of \$85.00, payable to the Florida Department of State as the fee for the enclosed resignation of registered agent for the above-mentioned limited liability company.

Should you have any questions, feel free to contact our office.

Very Truly Yours,

TURNER & LYNN, P.A.

BY:


SANDRA T. LYNN, ESQ.

2022 DEC -5 AM 9:14
FILED
CLERK OF COURT
JUDICIAL CIRCUIT IN AND FOR
THE NINTH JUDICIAL CIRCUIT
TALLAHASSEE, FLORIDA

STL/la
Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JEB FAMILY GROUP, LLC

Name of Limited Liability Company

DOCUMENT NUMBER: L22000027698

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:

SANDRA T LYNN, ESQ

Name of Person

TURNER & LYNN PA

Name of Firm/Company

7 BARRACUDA LANE

Address

KEY LARGO, FL 33037

City/State and Zip Code

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

For further information concerning this matter, please call:

SANDRA T. LYNN, ESQ

Name of Person

at (305) 367-0911

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 DEC -6 AM 8:11
TALLAHASSEE
SECRETARY OF STATE

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

JOHN L. WRIGHT

, hereby resigns as

Name of Registered Agent

Registered Agent for _____

JEB FAMILY GROUP LLC

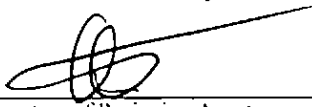
Name of Limited Liability Company

L22000027698

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

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FLORIDA