L22000194015

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(City/State/Zip/Phone #)
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COVER LETTER

Registration Section Division of Corporations SUBJECT: Ite Ad Real Estate LLC Name of Limited Liability Company DOCUMENT NUMBER: L22000194015 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: United States Corporation Agents, Inc. Name of Person Legalzoom.com, Inc. Name of Firm/Company 9900 Spectrum Dr. Address Austin, TX 78717 City/State and Zip Code raresignations@legalzoom.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Name of Person

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

STREET ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

TO:

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision:	s of section 605.0115, Florida	Statutes, the undersigned,		
United States Corporation Agents, Inc hereby			siens as	
	Name of Registered Agent	, hereby res	ngns 45	
Registered Agent for Ite	Ad Real Estate LLC			
	Name of Limited Liabil	ity Company		
L22000194015				
Document Nun	nber, if known			
A copy of this resignation	was mailed to the above list	ed limited liability company a	its last known address.	
The agency is terminated	and the office discontinued of	on the 31st day after the date o	n which this statement is fil	ed.
	Signature	of Resigning Agent	2023 OCT 31	77
If signing on behalf of an	entity:		C1 3	وتتتا التتا
	Cheyenne Moseley		•	
•	Typed or Pri	nted Name		المستشيخ المستدرية
	Asst. Secretary for United Sta	ites Corporation Agents, Inc.	PH 12: 01	
	Capacit	у	2	•

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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