# L22000225010

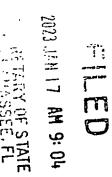
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### **COVER LETTER**

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 605.0115, Florida Statutes,	the undersigned,
Redesna Kinner		, hereby resigns as
N	ame of Registered Agent	(
Registered Agent for GTA	Holdings LLC	
	Name of Limited Liability Company	<u>,</u>
L22000225010		
Document Numb	per, if known	
The agency is terminated a		day after the date on which this statement is filed.
If signing on behalf of an e	entity:	2023 J.
_	Typed or Printed Name	
_	Capacity FILING FEES:	DOZ3 JAN 17 AM 9: 04  NATIONAL YOR STATE  NATI
	\$ 85.00 Active limited lia \$ 25.00 Administratively	ability company dissolved/voluntarily dissolved/ ed liability company

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