

L22000324655

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

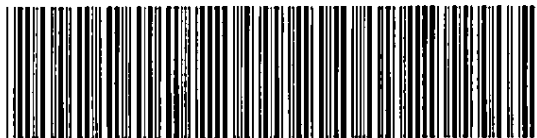
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2023 MAY -1 PM 1:01
CLERK OF SUPERIOR COURT
JULIA A. BROWN

Ra Resignation

JUL 27 2023

CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MAYFAIR MIAMI LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L22000324655

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:

Joseph A. Yofsky, Esq.

Name of Person

Yofsky Law, P.A.

Name of Firm/Company

100 SE 3rd Ave., Ste 1000

Address

Fort Lauderdale, Florida 33394

City/State and Zip Code

ajy@yofskylaw.com

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

For further information concerning this matter, please call:

Anna Khorsheva

at (954) 237-4011
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

2023 MAY -1 PM 1:01

FILED

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

Yolofsky Law, P.A.

Name of Registered Agent

, hereby resigns as

Registered Agent for MAYFAIR MIAMI LLC

Name of Limited Liability Company

L22000324655

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.

Line signed by

A. J. Yolofsky

Signature of Resigning Agent

If signing on behalf of an entity:

A. J. Yolofsky

Typed or Printed Name

Managing Shareholder

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

FILED
2023 MAY -1 PM 1:01
CORPORATE SERVICES
TALLAHASSEE, FL