L23000155409

Alpers Trustees, LLC (Requestor's Name)			
(Noquesial a Name)			
255 Primera Blvd. (Address)			
Ste 160 (Address)			
(Address)			
Lake Mary, F1. 32746 (City/State/Zip/Phone #)			
(City/State/21p/Filone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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FILED
2024 JUL -1 PH 4: 12

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provis	ions of section 605.0115, Florida Statutes, the u	ndersigned,
Alper Trustees, LLC		, hereby resigns as
	Name of Registered Agent	
Registered Agent for	The Holding Family, LLC	
	Name of Limited Liability Company	
L23000155409		
Document	Number, if known	
A copy of this resigna	ation was mailed to the above listed limited liabi	lity company at its last known address.
The agency is termina	ated and the office discontinued on the 31st day	after the date on which this statement is filed.
	Home	
	Signature of Resigning Age	ent TP P
If signing on behalf o	f an entity:	TALLAHAS
	Gideon Alper	AS: 1
	Typed or Printed Name	SEEC P
	Manager	70 7
	Capacity	PRI 4: 12

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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

INHS17 (2/14)