

L23000423215

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U.S. DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ROYAL PALM WAY HOLDINGS LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L23000423215

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:

David Loevln

Name of Person

Loevln Law Group, P.A.

Name of Firm/Company

800 W. Cypress Creek Road, Suite 528

Address

Fort Lauderdale, FL 33309

City/State and Zip Code

dloevln@lgttl.com

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

For further information concerning this matter, please call:

David Loevln

954

317-1742

Name of Person

at (

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

David Loevin _____, hereby resigns as

Name of Registered Agent

Registered Agent for ROYAL PALM WAY HOLDINGS LLC

Name of Limited Liability Company

L23000423215

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:

David Loevin

Typed or Printed Name

RA

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withdrawn limited liability company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
24 OCT 24 PM 5:04
TALLAHASSEE, FLORIDA