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(City/State/Zip/Phone #)

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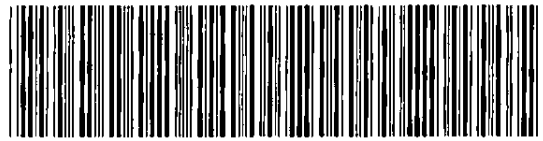
(Business Entity Name)

(Document Number)

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Saguella Cafe 2024 LLC  
Name of Limited Liability Company

DOCUMENT NUMBER: L230005550001

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:

Leo Alestrieri  
Name of Person

Saguella  
Name of Firm/Company

410 Viz R Palmer Ave, Apt 33432  
Address

Dade County, FL 33432  
City/State and Zip Code

wolfgroupus@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Leo Alestrieri at (561) 338-8840  
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

# STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

J. Meyers LLC, hereby resigns as  
Name of Registered Agent

Registered Agent for Sagwell Cafe 2024, LLC  
Name of Limited Liability Company

L230005550001  
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]  
Signature of Resigning Agent

If signing on behalf of an entity:

J. Meyers LLC  
Typed or Printed Name  
Member of J. Meyers LLC  
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

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Squella Cafe 2024 LLC  
Name of Limited Liability Company

DOCUMENT NUMBER: L230005550001

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:

Leo Alestrieri  
Name of Person

Squella  
Name of Firm/Company

460 Via De Palmas, Apt 33432  
Address

Dade County, FL 33432  
City/State and Zip Code

wolfgangus@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Leo Alestrieri at (561) 338-8840  
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.

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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,

J. Meyer LLC, hereby resigns as  
Name of Registered Agent

Registered Agent for Sagwell GK 2024, LLC  
Name of Limited Liability Company

L230005550001  
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]  
Signature of Resigning Agent

If signing on behalf of an entity:

J. Meyer LLC  
Typed or Printed Name  
Member of J. Meyer LLC  
Capacity

## FILING FEES:

\$ 85.00 Active limited liability company  
\$ 25.00 Administratively dissolved/ voluntarily dissolved/  
withdrawn limited liability company

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Tallahassee, FL 32314