

Via

L99 000000 3760

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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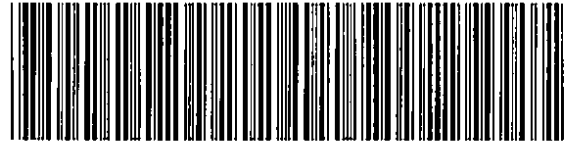
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JEFECO ASSOCIATES CONSTRUCTION, L.L.C.
Name of Limited Liability Company

DOCUMENT NUMBER: L99000003760

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:

JAMES C. VALENTI, ESQUIRE

Name of Person

JAMES C. VALENTI, P.A.

Name of Firm/Company

114 N. TENNESSEE AVE. SUITE 200

Address

LAKELAND, FL 33801

City/State and Zip Code

NONE ON FILE

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

For further information concerning this matter, please call:

JAMES C. VALENTI, ESQUIRE

at (863) 937-6056

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

JAMES C. VALENTI, ESQUIRE

, hereby resigns as

Name of Registered Agent

Registered Agent for JEFECO ASSOCIATES CONSTRUCTION, L.L.C.

Name of Limited Liability Company

L99000003760

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.

 6/11/24
Signature of Resigning Agent

If signing on behalf of an entity:

Typed or Printed Name

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withdrawn limited liability company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
2024 JUN 14 PM 2:11
TALLAHASSEE, FL
DIVISION OF CORPORATIONS
STATE OF FLORIDA



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Detail by Entity Name

Florida Limited Liability Company

JEFCO ASSOCIATES CONSTRUCTION, L.C.

Filing Information

Document Number L99000003760

FEI/EIN Number 59-3584707

Date Filed 06/25/1999

State FL

Status ACTIVE

Principal Address

5120 S Florida Ave

Suite 325

Lakeland, FL 33813

Changed: 04/19/2019

Mailing Address

P.O. BOX 6497

LAKELAND, FL 33807

Registered Agent Name & Address

VALENTI, JAMES CESQ

GIBSON VALENTI & ASHLEY

4927 SOUTHFORK DRIVE

LAKELAND, FL 33813

Name Changed: 04/16/2004

Address Changed: 04/16/2004

Authorized Person(s) Detail

Name & Address

Title MGRM

JEFFARES, DONALD J

P.O. BOX 6497

LAKELAND, FL 33807

Annual Reports