

L 99000005327

Florida Department of State
Division of Corporations
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LLC REGISTERED AGENT RESIGNATION
ORTHOPAEDIC SURGERY CENTER OF CLEARWATER, L.L.C.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$85.00

SEP 21 2021

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2021 SEP 20 PM 3:13

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STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

Venus D. Webb

, hereby resigns as

Name of Registered Agent

Registered Agent for Orthopaedic Surgery Center of Clearwater LLC

Name of Limited Liability Company

L99000005327

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 was filed.



Signature of Resigning Agent

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If signing on behalf of an entity:

Venus D. Webb

Typed or Printed Name

Resigning registered agent

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withdrawn limited liability company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