UB

ب

Division of Corporations

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000064080 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

T	\sim	٠	
	u		

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CARLTON FIELDS Account Number : 076077000355 Phone : (813)223-7000 Fax Number : (813)229-4133

													T,
**Enter	the	email	address	for	this	busines	SS	entity	to	be	used	for	future
an	nual	repor	t mailín	gs.	Enter	only or	ne	email	add	res	s ple	ase.	**

Email Address:

LLC REGISTERED AGENT RESIGNATION WATERFRONT PROPERTIES OF CAPE CORAL, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help

1+210000064080

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

CF REGISTEREI	D AGENT, INC.	he	ereby resigns	as		
	Name of Registered Agen		vite, ienBu			
Registered Agent for	WATERFRONT	PROPERTIES OF CAPE C	ORAL, LLO	<u> </u>		
	Name of Limi	ted Liability Company		·· <u> </u>	<u>.</u>	
	Hame of Com	ten thannny company				
M04000004694						
Document Nu	imber, if known					
A copy of this resignation	on was mailed to the a	pove listed limited liability cor	npany at its la	ist knowr	ı addr	ess.
The amount is terminate	d and the affice discor	itinued on the 31st day after th	e date on whi	ch this st	ateme	nt is file
If signing on behalf of a	10	Signature of Resigning Agent YCE F. BENTUBO	<u></u>			
		ped or Printed Name TOR/SECRETARY				
	DIREC	Capacity				
	FILING \$ 85.00 \$ 25.00		voluntarily d	is so lved/	21 TEB 16 /H 9-	, でひ
	Make checks payab	le to Florida Department of Sta Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	te and mail to	:	0.40	

INHS17 (2/14)

H21000064080