## MO6000005741

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PICK-UP WAIT	MAIL
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2017 NOV 27 PH 1: 20
SECRETARY OF STATE

K SALY Nuv 28 2017

## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT:	FLSC PROPERTIES, LLC		
	Name of Limited Liability Company		
DOCUMENT NUMBER:	M0600005741		
The enclosed Resignation of Regist for filing.	tered Agent for a Limited Liability Company and fee are submitted		
Please return all correspondence	oncerning this matter to the following:		
Kaitie Sp <b>e</b> r	ту		
Name of Pers	on		
Corporate Dire	ect, Inc.		
Name of Firm/ <b>C</b> ö	mpany		
2248 Meridian Bi	vd., Ste H		
Address	<del></del>		
Minden, NV 89	423		
City/State and Zi	Code		
info@corporatedi	ect.com		
E-mail address: (to be used for futur	e annual report notification)		
For further information concerning	this matter, please call:		
Kaitie Sperry	775 782-2201		
Name of Person	Area Code Daytime Telephone Number		
Enclosed is a check made payable liability company or \$25.00 for an liability company.	to the Florida Department of State for \$85.00 for an active limited administratively dissolved, voluntarily dissolved or withdrawn limited		
MAILING ADDRESS:	STREET ADDRESS:		
Registration Section	Registration Section		
Division of Corporations	Division of Corporations		
P.O. Box 6327	Clifton Building		
Tallahassee, FL 32314	2661 Executive Center Circle		
	Tallahassee, FL 32301		

INHS17 (2/14)

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

				MINON 27 PX 1: 20
Pursuant to the provision	s of section <b>(6</b> 05.011	15, Florida Statutes, the unc	lersigned,	題名「
	Gerri D <b>et</b> weiler	Г	, hereby resigns as	S. 23
_	Name of Registered Age	ent		Con 3
Registered Agent for	FL:	SC PROPERTIES, LL	С	700
<u></u>				ALL O
	Na <b>me</b> of Lir	mited Liability Company		
M06000	0005741			
	nber, if known	<del></del>		
A copy of this resignatio	n was mailedito the	above listed limited liabilit	y company at its last	known address.
The agency is terminated	and the office disco	Signature of Resigning Agent		this statement is filed.
If signing on behalf of ar		Gerri Detweiler Typed or Printed Name		
	1821	Registered Agent		
	\$ 85.00 \$ 25.00	Administratively dissol withdrawn limited liab	ved/voluntarily diss ility company	olved/
	Make checks paya	able to Florida Department o	of State and mail to:	
INHS17 (2/14)		Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		