

M12000001355

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : FOLEY & LARDNER
Account Number : 072720000061
Phone : (904) 359-2000
Fax Number : (904) 359-8700

FILED
18 FEB 21 AM 9:59

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC REGISTERED AGENT RESIGNATION
GOOD CHOICE PRESERVATION, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$85.00

RECEIVED
FEB 21 2018

J. LEGGETT
FEB 22 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GOOD CHOICE PRESERVATION, LLC

Name of Limited Liability Company

DOCUMENT NUMBER: M12000001355

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:

CHARLES V. HEDRICK

Name of Person

F & L CORP.

Name of Firm/Company

ONE INDEPENDENT DRIVE, STE 1300

Address

JACKSONVILLE, FL 32202

City/State and Zip Code

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

For further information concerning this matter, please call:

AMBER WARE

Name of Person

at (

904

Area Code

359-8768

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

F & L CORP

Name of Registered Agent

, hereby resigns as

Registered Agent for GOOD CHOICE PRESERVATION, LLC

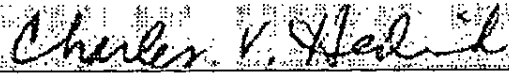
Name of Limited Liability Company

M12000001355

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 of Resigning Agent

If signing on behalf of an entity:

CHARLES V. HEDRICK

Typed or Printed Name

AUTHORIZED SIGNATORY

Capacity

FILED
18 FEB 21 AM 8:59
TALLAHASSEE, FL
FEE
\$15.00

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



February 19, 2018

FLORIDA DEPARTMENT OF STATE
Division of Corporations

GOOD CHOICE PRESERVATION, LLC
5438 ASHTON COURT
SARASOTA, FL 34233

SUBJECT: GOOD CHOICE PRESERVATION, LLC
REF: M12000001355

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The form you submitted is for a CORPORATION - INC, but your entity is a LIMITED LIABILITY COMPANY - LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Warren
Regulatory Specialist II

FAX Aud. #: E18000056794
Letter Number: 018A00003483

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FEB 21 2018