

M12000005262

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

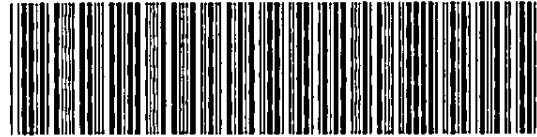
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2021 MAY 30 AM 9:28
TALLAHASSEE, FL
CLERK OF COURT

D BRUCE
MAY 23 2021

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JES GLOBAL CAPITAL GP LLC.
Name of Limited Liability Company

DOCUMENT NUMBER: M12000005202

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:

ADAM BLEGGI

Name of Person

ABN LAW, PLLC

Name of Firm/Company

2390 TAMiami TRAIL N, SUITE 214

Address

NAPLES, FL 34103

City/State and Zip Code

showitt@jesglocap.com

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

For further information concerning this matter, please call:

ADAM BLEGGI

Name of Person

at (239) 316-7987

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

FILED
2021 MAR 30 AM 9:28
TALLAHASSEE, FL

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

ABN LAW, PLLC _____, hereby resigns as
Name of Registered Agent

Registered Agent for JES GLOBAL CAPITAL GP LLC.

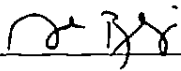
Name of Limited Liability Company

MI2000005202

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:

ADAM BLEGGI

Typed or Printed Name

MANAGER OF ABN LAW, PLLC

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
2021 MAR 30 AM 9:28
TALLAHASSEE, FL