M13000006979

(Requestor's Name)

(Address)

(Address)

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RA Resignation

SEP 03 2025

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FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302
155 Office Plaza Dr Ste A Tallahassee FL 32301
PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: ~~8/22/2025~~ 8/29/2025

NAME: 179 STREET MIAMI, LLC

TYPE OF FILING: RESIGNATION

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AUTHORIZATION: ABBIE/PAUL HODGE a Hodge

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

FLORIDA FILING & SEARCH SERVICES, INC , hereby resigns as

Name of Registered Agent

Registered Agent for 179 STREET MIAMI, LLC

Name of Limited Liability Company

M13000006979

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:

Typed or Printed Name

Sr. Vice President

Capacity

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TALLAHASSEE, FLORIDA

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$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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

INHS17 (2/14)