## M16000004161

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
, , , , ,	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
grand management	
13. DENNIS	
J. DENNIS 12.19.24	

Office Use Only



200441296072

2024 DEC 18 PM 2: 12

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

Pursuant to the provisions of section 605.011	5, Florida Statutes, the undersigned,
Benjamin R. Hanan	, hereby resigns as
Name of Registered Age	
Registered Agent for BOBCAT NORTH AME	ERICA, LLC
Name of Lin	nited Liability Company
M16000004161	
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 disce	ntinued on the 31st day after the date on which this statement is filed.  Signature of Resigning Agent
If signing on behalf of an entity!	
т	yped or Printed Name
	Capacity

FILING FEES: \$ 85.00 Activ \$ 25.00 Admi Active limited liability company
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withdrawn limited liability company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

INH\$17 (2/14)