M21000006709

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(Red	questor's Name)	
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COVER LETTER

TO: 1	Registration Section Division of Corporations			
SUBJE	CT: GLF-IMMOKALEE, LLC			
	Name (of Limite	ed Liability	Company
DOCU	MENT NUMBER: M210000067	.09		
The enc for filing		gent for	a Limited	Liability Company and fee are submitte
Please r	eturn all correspondence concerni	ng this n	natter to th	e following:
MANP	REET KAUR			
	Name of Person			
PARAG	CORP INCORPORATED			
	Name of Firm/Company			
РО ВС	X 160568			
	Address			
Sacrar	mento, CA 95833			
	City/State and Zip Code			
E-m	nail address: (to be used for future annual	report no	tilication)	
	her information concerning this m			
MANP	REET KAUR	at (800	533-7272 Daytime Telephone Number
	Name of Person	at (_	Area Code	Daytime Telephone Number

STREET ADDRESS:

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Registration Section

Clifton Building

INHS17 (2/14)

P.O. Box 6327

MAILING ADDRESS:

Division of Corporations

Tallahassee, FL 32314

Registration Section

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provis	ions of section 605.01	15, Florida Statutes, the	undersigned.			
PARACORP INCORPORATED			, hereby resigns as			
	Name of Registered Ag-		<u> </u>			
Registered Agent for	GLF-IMMOKALEE	E, LLC	±.			
		mited Liability Company				
	Name of the	nuted Clabinty Company				
M21000006709						
Document	Number, if known					
A copy of this resigna	tion was mailed to the	above listed limited liab	oility company at its last	known ad	ldress.	
The agency is termina	ted and the office disc	ontinued on the 31st day	after the date on which	this states	ment is	tiled.
		Signature of Resigning As	zent .			
If signing on behalf of	an entity:		•			
	ABIGALE PETE	ERSON				
	- ·	Typed or Printed Name		₽ř	2023	
	Asst. Secretary			A.E.	33.	TI
		Capacity		AHASSI	2023 SEP 26	
				E C	PH	
	FILING \$ 85.00 \$ 25.00	Active limited liabili Administratively dis withdrawn limited li	ity company solved/ voluntarily diss iability company	STATE FLORIDA	4 3: 13	

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314