

1/17/24, 7:33 AM

Division of Corporations

Florida Department of State  
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Email Address: cls-agentresignations@wolterskluwer.com

**LLC REGISTERED AGENT RESIGNATION  
GAMMA FL WYNWOOD LLC**

|                       |         |
|-----------------------|---------|
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K. SALY

JAN 18 2024

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

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

NRAI SERVICES, INC.

, hereby resigns as

Name of Registered Agent

Registered Agent for GAMMA FL WYNWOOD LLC

Name of Limited Liability Company

M22000006002

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.

*Nancy Helm-Brown*

Signature of Resigning Agent

If signing on behalf of an entity:

NANCY HELM-BROWN

Typed or Printed Name

ASSISTANT SECRETARY

Capacity

### **FILING FEES:**

|          |   |
|----------|---|
| \$ 85.00 | Active limited liability company  |
| \$ 25.00 | Administratively dissolved/ voluntarily dissolved/<br>withdrawn limited liability company |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