## PC4000113996

(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.		
7.8.24		





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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: LJM Properties, Inc.
(Name of Corporation)
DOCUMENT NUMBER: P04000113996
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Paul Renner, Esq.
(Name of Person)
Paul Renner, Esq.  (Name of Person)  Nelson Mullins Riley & Scarborough LLP  (Name of Firm/Company)
50 N. Laura Street, Suite 4100 (Address)
Jacksonville, FL 32202 (City/State and Zip Code)
For further information concerning this matter, please call:
Allison Abbott at ( 904 ) 665-3632 (Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of section	18 607.0503(2), 617.0502(2), 607.1509, 6	r 617.1509,
Florida Statutes, the undersigned, _	Paul Renner	
, to the blanches, the undereigned, _	(Name of Registered Agent)	
hereby resigns as Registered Agent	for LJM Properties, Inc. (Name of Corporation)	
P04000113996		
(Document Number, if known)		
A copy of this resignation was mail	ed to the above listed corporation at its la	st known address.
The agency is terminated and the of this statement is filed.	fice discontinued on the 31st day after the	e date on which
/s/ Paul Renr	ner	~2
	(Signature of Resigning Agent)	77. 033.s
If signing on behalf of an entity:		2021, JUL -8 SECRETARS TALLARS
	Paul Renner	- 33 B - 35 PH
	(Typed or Printed Name)	- 学年 IF ディーラ
	Registered Agent	28 F1

## Fee for filing this document;

\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

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

(Capacity)