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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
		MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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FILED 2022 MAY -6 PM 1: 37 FALLAHASSEE, FLORIDA

JUN 2 8 2022 S. PRATHER

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: COASTLAND Property Corp. (Name of Corporation) DOCUMENT NUMBER: P19000078363

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:

For further information concerning this matter, please call:

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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



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Best Florida Consulting, LLC 1110 SW 28th Street Cape Coral, FL 33914 **2**+1 (239) 573-9601 jhartwich@hotmail.com www.bestfloridaconsulting.com

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

01-06-2022

SUBJECT: Document # P19000078363 Coastland Property Corp.

Dear Sirs,

attached please find the amendment for Coastland Property Corp. and a check for the filing in the amount of

\$ 87.50

Best regards! Best Florida Consulting LLC



RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

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Pursuant to the provisions of sections 607.0503(2), 617.0502(2), 607.1509. or 617.1509.
Florida Statutes, the undersigned, <u>BCJ} FLOrida Consulting LLC</u> (Name of Registered Agent)
hereby resigns as Registered Agent for <u>COQSICAND</u> Property COPS.
<u>Dig00078363</u> (Document Number, if known)

A copy of this resignation was mailed to the above listed corporation 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: Hartwich (Typed or Printed Name) MGR (Capacity)	FILED 2022 MAY -6 PM 1: 37

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