

L06000093140

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

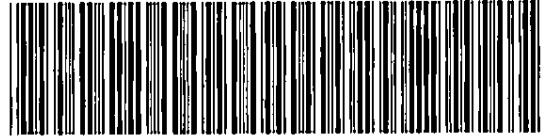
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FALL 2021

2021 JUL 26 PM 3:28

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7/26

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Crypto Asset Management, LLC

Name of Limited Liability Company

DOCUMENT NUMBER: 1.06000093140

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Timothy Enneking

Name of Person

Name of Firm/Company

6523 Caminito Catalan

Address

La Jolla, CA 92037

City/State and Zip Code

enneking@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Timothy Enneking

at (561) 506-6656

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

Mailing Address:

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

Street Address:

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

FILED
2021 JUL 26 PM 3:29
TALLAHASSEE, FL
SECRETARY OF STATE

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

Timothy Enneking

Name of Registered Agent

, hereby resigns as

Registered Agent for Crypto Asset Management, LLC

Name of Limited Liability Company

L06000093140

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.

Timothy Enneking

Signature of Resigning Agent

If signing on behalf of an entity:

Typed or Printed Name

Capacity

FILED
2021 JUL 26 PM 3:29
TALLAHASSEE
FLORIDA

FILING FEES:

\$ 85.00 Active limited liability company
\$ 25.00 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