L03000021827

CFRA, LLC
(Requestor's Name)
P.O. BOX 3239
(Address)

(Address)
Tampa, FL 33601
(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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3/3 - PA Resign

L03-21827

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05 MAR -3 PM 4:45
SECRETARY OF STATE
TALLAHASSEE FLORIDA

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416(2) or 608.509, Florida Statutes, the undersigned,

CFRA, LLC hereby resigns as
(Name of registered agent)

Registered Agent for 4938 SW 135TH AVENUE, LLC.
(Name of Limited Liability Company)

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:

Peter J. Winders
(Typed or Printed Name)

Vicepresident
(Capacity)

FILING FEES::
$85.00 Active corporation
$25.00 Administratively dissolved corporation

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

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05 MAR -3 PM 4:45
TALLAHASSEE, FLORIDA

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