108000005927

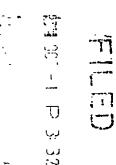
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to Fitting Officer.

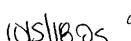
Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations

CHEVY SHACK STUDIOS, LLC SUBJECT:			
Name of Limited Liability	Company		
DOCUMENT NUMBER: L08000005927			
The enclosed Resignation of Registered Agent for a Limite for filing.	d Liability Company and fee ar	e submi	tted
Please return all correspondence concerning this matter to t	he following:		
Invoice Team			
Name of Person	_		
COGENCY GLOBAL INC			
Name of Firm/Company	-		
850 New Burton Rd Suite 201) - ,	-13 -13	بسنر. سد
Address	_	ئي. چ	
Dover, De 19904		-	1
City/State and Zip Code	-	77	1
invoices@cogencyglobal.com		نب رب	
E-mail address: (to be used for future annual report notification)	,	<i>~</i> ⊃	
For further information concerning this matter, please call:			
Invoice Team 866	621-3524		
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Name of Registered Agent CHEVY SHACK STUDIOS, LLC Name of Limited Liability Company Document Number, if known A copy of this resignation was mailed to the above listed limited liability company at its last known address.	Pursuant to the provision	ons of section 605.0115, Florida Statutes, the	undersigned.				
Name of Registered Agent Registered Agent for CHEVY SHACK STUDIOS, LLC Name of Limited Liability Company	COGENCY GLOBAL INC		hereby resions:	_ , hereby resigns as			
Name of Limited Liability Company L08000005927 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 Krystal Beckner Signature of Resigning Agent Krystal Beckner Typed or Printed Name		Hereny reorganis					
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 Krystal Beckner Signature of Resigning Agent Krystal Beckner Typed or Printed Name	Registered Agent for C	CHEVY SHACK STUDIOS, LLC					
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 Krystal Beckner Signature of Resigning Agent Krystal Beckner Typed or Printed Name		Name of Limited Liability Company					
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 Krystal Beckner Signature of Resigning Agent Krystal Beckner Typed or Printed Name			:-		~.3.		
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The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed Krystal Beckner Signature of Resigning Agent Krystal Beckner Typed or Printed Name	Document N	umber, if known			ا ب		
The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed Krystal Beckner Signature of Resigning Agent If signing on behalf of an entity: Krystal Beckner Typed or Printed Name	A copy of this resignati	on was mailed to the above listed limited lia	bility company at its la	st kn		dress.	
Signature of Resigning Agent Signature of Resigning Agent Krystal Beckner Typed or Printed Name	The agency is terminate	ed and the office discontinued on the 31st day	y after the date on which	ch thi	•	nent is filed	
If signing on behalf of an entity: Krystal Beckner Typed or Printed Name		Krystal Beckn	er :	7.2	32		
Krystal Beckner Typed or Printed Name		Signature of Resigning A	Agent				
Typed or Printed Name	If signing on behalf of a	an entity:					
		Krystal Beckner					
Assistant Secretary		Typed or Printed Name					
		Assistant Secretary					
Capacity		Capacity					

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

Active limited liability company
Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company

FILING FEES:

\$ 85.00 \$ 25.00

Tallahassee, FL 32314