# L08000018629

(Re	questor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	#)
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### PRESTON O. COCKEY, JR., P.A.

--- Attorney At Law

110 E. Madison Street Suite 204 Tampa, Florida 33602 Tel: 813-275-5015 Fax: 813-275-5016 E-mail: gbarber@poclaw.com

April 17, 2015

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Registered Agent Resignation - Document No. L08000018629

To Whom It May Concern:

Enclosed please find a Resignation of Registered Agent for JPWB, LLC, a Florida Limited Liability Company and the filing fee of \$85.00 to be effective immediately.

Please call me at (813) 275-5015 if you have any questions.

Thank you.

Very truly yours,

Gina R. Barber, Legal Administrator

to Preston O. Cockey, Jr.

/grb Enclosures

348103-1 Ltr to Sec of State (Registered Agent Resignation) 4-17-15

#### **COVER LETTER**

SUBJECT: Name	of Limited Liability	Company
DOCUMENT NUMBER: L080000180	629 	
The enclosed Resignation of Registered Afor filing.	Agent for a Limited	d Liability Company and fee are submitted
Please return all correspondence concern	ing this matter to t	he following:
Jason T. Rappaport and Philippe The	eodore	
Name of Person		-
JPWB, LLC		
Name of Firm/Company	,	-
13907 Carrollwood Village Run		
Address		-
Tampa, FL 33618		
City/State and Zip Code	;	-
jason@jtrdevelopment.com and phili	ppetheodore@gr	nail.com
E-mail address: (to be used for future annua	l report notification)	-
For further information concerning this n	natter, please call:	
Jason T. Rappaport	813	220-2399
Name of Person	Area Code	220-2399 Daytime Telephone Number

#### MAILING ADDRESS:

Registration Section Division of Corporations

TO:

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

Pursuant to the provisions	of section 605.011	5, Florida Statutes, the u	undersigned,		
Preston O. Cockey,	, hereby resigns as				
1	Name of Registered Ager	nt	, nelecty resigns as		
Registered Agent for JP	WB, LLC	· · · · · · · · · · · · · · · · · · ·	<del></del>		
	Name of Lim	nited Liability Company		,	
L08000018629					
Document Num	ber, if known				
	and the office disco		ility company at its last known after the date on which this sta		filed.
					5
-		yped or Printed Name		5 APR 2	
		Capacity	<del></del>	24 PM	
	<b>FILING</b> \$ 85.00 \$ 25.00	FEES: Active limited liabili Administratively diss withdrawn limited li	ty company solved/ voluntarily dissolved/ ability company	12:54	

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