

209000099991

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

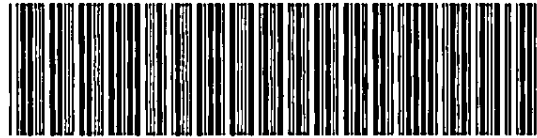
Special Instructions to Filing Officer:

J. HORNE

APR 29 2022

4/21

Office Use Only



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2022 APR 27 PM 12:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2022 APR 27 AM 11:13

SECRETARY OF STATE
TALLAHASSEE, FL

April 14, 2022

AMY MANNING
180 PARK AVENUE NORTH
SUITE 2A
WINTER PARK, FL 32789 US

SUBJECT: VINYL PRODUCTIONS, L.L.C.
Ref. Number: L09000099991

We have received your document and check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Jasmine N Horne
Regulatory Specialist II

Letter Number: 322A00008762

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Vinyl Productions, L.L.C.
Name of Limited Liability Company

DOCUMENT NUMBER: L09000099991

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:

Attention: Amy Manning
Name of Person

Byrd Campbell, P.A.
Name of Firm/Company

180 Park Avenue North, Suite 2A
Address

Winter Park, FL 32789
City/State and Zip Code

amanning@byrdcampbell.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Amy Manning at (850) 308-7125
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

**STATEMENT OF RESIGNATION OF REGISTERED AGENT
FOR A LIMITED LIABILITY COMPANY**

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

James S. Campbell, hereby resigns as
Name of Registered Agent

Registered Agent for Vinyl Productions, L.L.C.

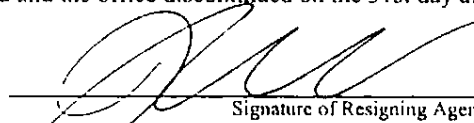
Name of Limited Liability Company

L09000099991
Document Number, if known

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.


Signature of Resigning Agent

If signing on behalf of an entity:

Typed or Printed Name

Capacity

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**