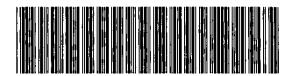
## L11000059449

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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

September 7, 2016

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

Re: Registered Agent Resignation - Document No. L11000059449

To Whom It May Concern:

Enclosed please find a Resignation of Registered Agent for St. Pete Beer Partners, LLC, a Florida Limited Liability Company and check #8260 in the amount of \$85.00 for the filing fee, 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) 9-7-16

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: St. Pete Beer Partners, LLC		
Name of Lin	nited Liability	Company
DOCUMENT NUMBER: L1100005	9449	
The enclosed Resignation of Registered Agent for filing.	for a Limited	Liability Company and fee are submitted
Please return all correspondence concerning this	is matter to th	e following:
Jason T. Rappaport		
Name of Person		
Name of Firm/Company		
660 S. Colorado Boulevard		
Address		
Denver, Colorado 80246		
City/State and Zip Code		
jason@jtrdevelopment.com		
E-mail address: (to be used for future annual report	notification)	
For further information concerning this matter,	please call:	
Jason T. Rappaport	813	220-2399
Name of Person	Area Code	Daytime Telephone Number
Enclosed is a check made payable to the Florid liability company or \$25.00 for an administrative liability company.	a Department vely dissolved	of State for \$85.00 for an active limited l, voluntarily dissolved or withdrawn limited
MAILING ADDRESS:	STREE	T ADDRESS:
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	

Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

INHS17 (2/14)

P.O. Box 6327

Tallahassee, FL 32314

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

Pursuant to the provisi	ons of section 605.0115, Florida Statutes, the i	ındersigned,	
Preston O. Cocke	y, Jr.	, hereby resigns as	
	Name of Registered Agent	, nereby reorgine un	
Registered Agent for _	St. Pete Beer Partners, LLC		
	Name of Limited Liability Company		,
L11000059449			
Document N	lumber, if known		
A copy of this resignat	ion was mailed to the above listed limited liab	ility company at its last known a	ddress.
The agency is terminat	ed and the office discontinued on the 31st day		ement is, filed.
If signing on behalf of	an entity:	CFSA: CFLORIIA	9
	Typed or Printed Name		<u>জ</u>
	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