

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6380

From: Account Name : FOWLER, WHITE 2  
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**REGISTERED AGENT RESIGNATION  
COBU, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$87.50

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*[Handwritten Signature]*  
9/24

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

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


FOWLER WHITE BOGGS P.A. hereby resigns as

Registered Agent for COBU, LLC

L11000107310

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:

Kendra L. Gaugush

Authorized representative  
Capacity

**FILING FEES:**

\$85.00 Active limited liability company  
\$ 25.00 Administratively dissolved/ voluntarily dissolved/  
withdrawn limited liability company

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