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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM Account Number : FCA00000023

: (850)205-8842 : (850)878-5368 Phone Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

## LLC REGISTERED AGENT RESIGNATION J & P WIRELESS LLC

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K. S.ALY EXAMINER

JUN 21

TO: Registration Section Division of Corporations

INHS17 (2/14)

## **COVER LETTER**

·	•
SUBJECT: J&P Wireless LLC	
DOMOGOT!	me of Limited Liability Company
DOCUMENT NUMBER: L1300000	
The enclosed Resignation of Registered for filing.	d Agent for a Limited Liability Company and fee are submitted
Please return all correspondence concer	rning this matter to the following:
Kate Seldita	
Name of Person	<del></del>
C T CORPORATION SYSTEM	
Name of Firm/Compa	ny
111 8th Avenue, 13th Floor	
Address	<del></del>
New York, New York 10011	
City/State and Zip Coo	de
kate.seiditia@wolterskluwer.com	
E-mail address: (to be used for future annual	ual report notification)
For further information concerning this	matter, please call:
Kate Seldita	212 894-8526
Name of Person	at (212 894-8526  Area Code Daytime Telephone Number
Enclosed is a check made payable to the liability company or \$25.00 for an admiliability company.	e Florida Department of State for \$85.00 for an active limited inistratively dissolved, voluntarily dissolved or withdrawn limite
MAILING ADDRESS:	STREET ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle
	Tallahassee, PL 32301

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

C T CORPORATION SYSTEM  Name of Registered Agent		, hereby resigns as	2016 JUN 20 TALLAHASS
J&P Wireless Lt	.C		<u>~</u> ~ 1
	Name of Limited Liability Company		Trus
L13000000213			7: 50 SIATE CORIO
Documen	nt Number, if known		- Marie
;	nation was mailed to the above listed limited liabilities and the office discontinued on the 31st day a Signature of Resigning Ager	fter the date on which t	
If signing on behalf	<b>a</b>		
	of an entity:		
	of an entity:  C T Corporation System - Kate Seidi	ta	
	•	ta	
	C T Corporation System - Kate Seidi	ta	

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

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