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Certified Copies	Certificates o	of Status
Special Instructions to	Filing Officer:	
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JAN 06 S. PRATHER

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Black Cypress Bee LLC	
Name of Limited Liability	Company
DOCUMENT NUMBER: L14000042816	
The enclosed Resignation of Registered Agent for a Limited for filing.	Liability Company and fee are submitted
Please return all correspondence concerning this matter to the	ne following:
United States Corporation Agents, Inc.	
Name of Person	
Legalzoom.com, Inc.	
Name of Firm/Company	
9900 Spectrum Dr.	
Address	
Austin, TX 78717	
City/State and Zip Code	
raresignations@legalzoom.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
at (<u>800</u>	773-0888
Name of Person Area Code	Daytime Telephone Number

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET ADDRESS:

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

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 provisi	ions of section 605.0115	. Florida Statutes, the unders	signed,		
United States Corporation Agents, Inc.		_ , hereby resigns as			
Name of Registered Agent					
Registered Agent for _	Black Cypress Bee	LLC			_
					_,
	Name of Limit	ed Liability Company			
L14000042816					
Document 1	Number, if known				
A copy of this resignat	tion was mailed to the ab	oove listed limited liability co	ompany at its last know	n address	S.
The agency is terminal	ted and the office discon	tinued on the 31st day after t	he date on which this s	tatement	is filed
	5.6	Transflaire			
		Tracklain Signature of Resigning Agent			
If signing on behalf of				~	2
	Erik Treutlein				2024 ::
	Ty	ped or Printed Name			<u>.</u>
	Vice President on behalf	of United States Corporation Age	ents, Inc.	i.	C.)
		Capacity		, •	Ę,
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	FILING F \$ 85.00 \$ 25.00	EES: Active limited liability con Administratively dissolved withdrawn limited liability	/ voluntarily dissolved	.` I	10

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