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(Address)			
, (Address)			
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COVER LETTER

SUBJECT: 706 CHAJACH LLC Name of Limited		
Name of Limited	Liability Company	
DOCUMENT NUMBER: WINOCOON	7045	
The enclosed Resignation of Registered Agent for a for filing.	Limited Liability Company and fee are submitted	
Please return all correspondence concerning this ma	atter to the following:	
United States Corporation Agents, Inc.		
Name of Person		
Legalzoom.com, Inc.		
Name of Firm/Company		
101 North Brand Blvd. 11th Floor		
Address		
Glendale, CA 91203		
City/State and Zip Code		
raresignations@legalzoom.com		
E-mail address: (to be used for future annual report noti-	fication)	
For further information concerning this matter, plea	se call:	
Jazmine Johnson	773-0888 rea Code Daytime Telephone Number	
Name of Person A	rea Code Daytime Telephone Number	
Enclosed is a check made payable to the Florida Deliability company or \$25.00 for an administratively liability company.	epartment of State for \$85.00 for an active limited dissolved, voluntarily dissolved or withdrawn limited	
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, FL 32301

TO: Registration Section Division of Corporations

FILED

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY SECRETARY OF STATE TALLAMASSEE, FL

Pursuant to the provision	ons of section 605.0115. Florida Stat	ates, the undersigned,
United States Corp	poration Agents, Inc.	, hereby resigns as
	Name of Registered Agent	
Registered Agent for 7	06 CHAJACH LLC	
	Name of Limited Liability Co	mpany
MHOOOS Document N	JMHONS Jumber, if known	
A copy of this resignat	ion was mailed to the above listed lin	nited liability company at its last known address.
The agency is terminat	ed and the office discontinued on the	e 31st day after the date on which this statement is filed.
	Signature of R	esigning Agent
If signing on behalf of	an entity:	
	Cheyenne Moseley	
	Typed or Printed	
	Asst. Secretary for United States	Corporation Agents, Inc.
	Capacity	

FILING FEES:

Active limited liability company Administratively dissolved/ voluntarily dissolved/ \$ 85.00 \$ 25.00 withdrawn limited liability company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