# L14000059919

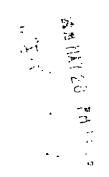
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(Add	lress)	<del></del>
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Certified Copies	Certificates of	of Status
Special Instructions to F	iling Officer:	





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### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Joe Willy Band LLC Name of Limited Liability Company
DOCUMENT NUMBER: <u>L 14000059919</u>
The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Cheyenne Moseley Name of Person J
Name of Wirm/Company
13302 Winding Oak Court A
Tampa Fl 33612 Clty/State and Zip Code
4 <del>.</del>
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (863) 521-6276  Area Code Daytime Telephone Number
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

## MAILING ADDRESS:

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

## STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

INHS17 (2/14)

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

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,
United States Corporation Agents, Inc., hereby resigns as Name of Registered Agent
Registered Agent for Joe Willy Band, LLC
Name of Limited Liability Company
Document Number, if known
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.
Cheyenne Moseley Signature of Resigning Agent
If signing on behalf of an entity:
Cheyenne Moseley Typed or Printed Name
Capacity

**FILING FEES:** \$ 85.00 Active \$ 25.00 Admir Active limited liability company
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