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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Butch's Bistro & BBQ, LLC Name of Limited Liability Company
Name of Limited Liability Company
DOCUMENT NUMBER: L15000028911
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:
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:
Name of Person at (800) 773-0888 Area Code Daytime Telephone Number
Name of Person 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ons of section 605.0115. Florida Statutes, the under	signed,	737
United States Corporation Agents, Inc. Name of Registered Agent		_ , hereby resigns as	7972 W.E
			1.0
Registered Agent for	Butch's Bistro & BBQ, LLC	-	,
<i>c c</i> –			
	Name of Limited Liability Company		69
L15000028911			
Document N	umber, if known		
A copy of this resignati	on was mailed to the above listed limited liability of	company at its last kno	own address.
The agency is terminate	ed and the office discontinued on the 31st day after	the date on which this	s statement is filed.
			
	Signature of Resigning Agent		
If signing on behalf of a	an entity:		
	Cheyenne Moseley		
	Typed or Printed Name		
	Asst. Secretary for United States Corporation Age	ents, Inc.	
	Capacity		

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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