

Jun 12 08:17a

AIA REGISTERED AGENT INC.

561-267-8082

p.1

# L15000076990

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H18000175750 3)))



H180001757503ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850) 617-6393

From:

Account Name : AIA REGISTERED AGENT INC.  
Account Number : 120090300037  
Phone : (561) 792-2236  
Fax Number : (561) 267-8082

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

Email Address: \_\_\_\_\_

RECEIVED

2018 JUN 12 AM 9:54

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL 32399

LLC REGISTERED AGENT RESIGNATION  
CHEF JOHN'S PLACE, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

SECRETARY OF STATE  
JUN 12 2018 10:16 AM

18 JUN 12 AM 10:57

FILED

Electronic Filing Menu

Corporate Filing Menu

Help

K SALY

JUN 13 2018

H18000175750 3

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

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

**SUPERBIZ REGISTERED AGENT, INC.**

Name of Registered Agent

, hereby resigns as

Registered Agent for **CHEF JOHN'S PLACE, LLC**

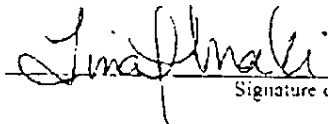
Name of Limited Liability Company

**L15000076990**

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.



Signature of Resigning Agent

If signing on behalf of an entity:

**TINA MAKI**

Typed or Printed Name

**PRESIDENT**

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\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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

H18000175750 3