

Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

L17000048187

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To:

Division of Corporations
 Fax Number : (850)617-6383

From:

Account Name : A1A REGISTERED AGENT INC.
 Account Number : I20290000032
 Phone : (561)792-2236
 Fax Number : (561)202-8082

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

Email Address: _____

**LLC REGISTERED AGENT RESIGNATION
 URBAN LEGENDS FISHING CHARTERS LLC**

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
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| Page Count | 02 |
| Estimated Charge | \$85.00 |

2022 JUN -7 PM 1:53

2022 JUN -7 PM 4:08

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STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

AIA REGISTERED AGENT INC.

, hereby resigns as

Name of Registered Agent

Registered Agent for URBAN LEGENDS FISHING CHARTERS LLC

Name of Limited Liability Company

L17000048187

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.

Tina Maki

Signature of Resigning Agent

If signing on behalf of an entity:

TINA MAKI

Typed or Printed Name

DP

Capacity

FILING FEES:

\$ 85.00

Active limited liability company

\$ 25.00

Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company

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

INHS17 (2/14)

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