

L17000140226

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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2021 FEB 15 PM 4:11



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 29, 2021

JESSICA KENDRICK
KENDRICK LAW GROUP
630 N. WYMORE RD. SUITE 370
MAITLAND, FL 32751

SUBJECT: 4ONE.ONE, LLC
Ref. Number: L17000140226

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

THE FEE TO FILE A RESIGNATION FOR AN ACTIVE LIMITED LIABILITY COMPANY IS \$85.00. THERE IS A BALANCE OF \$60.00 STILL DUE. PLEASE RESUBMIT.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent
Regulatory Specialist II

Letter Number: 121A00002096

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 4 ONE . ONE . LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L17000140226

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:

Jessica Kendrick
Name of Person

Kendrick Law Group
Name of Firm/Company

630 N. Wymore Rd. Suite 370
Address

Maitland, FL 32751
City/State and Zip Code

business@kendricklawgroup.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Leslie Artze at (407) 641-5847
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

Jessica H. Kendrick PLLC, hereby resigns as
Name of Registered Agent

Registered Agent for 4ONE.ONE, LLC
Name of Limited Liability Company

L17000140226
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.

Leslie Artze
Signature of Resigning Agent

If signing on behalf of an entity:

Leslie Artze
Typed or Printed Name
Associate
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