# L17000 a0a 761

(Re	questor's Name)	
(Ad	dress)	
bA)	dress)	
(Cit	y/State/Zip/Phone	e #)
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(Do	cument Number)	
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R. WHITE.
JUL 29 2019

# **COVER LETTER**

**TO:** Registration Section Division of Corporations

SUBJECT: FOUR 4 PROPERTY GROUP, LLC
Name of Limited Liability Company
DOCUMENT NUMBER: L17000202761
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
101 North Brand Blvd. 11th Floor
Address
Glendale, CA 91203
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:
Kasandra Lund at ( 1 800 ) 773-0888 x3951
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 provis	ions of section 605.0115, Florida Statutes, the undersign	ed,
United States Corporation Agents, Inc.		, hereby resigns as
<del></del>	Name of Registered Agent	
Registered Agent for_	FOUR 4 PROPERTY GROUP, LLC	
	Name of Limited Liability Company	
1.17000202761		
Document l	Number, if known	
A copy of this resigna	tion was mailed to the above listed limited liability comp	pany at its last known address.
	Signature of Resigning Agent	
If signing on behalf of an entity:		2019
	Cheyenne Moseley	2019 J.J.
	Typed or Printed Name	
	Asst. Secretary for United States Corporation Agents, In	në .
	Capacity	<u>p</u> 35
	FILING FEES: \$ 85.00 Active limited liability company \$ 25.00 Administratively dissolved/y	y voluntarily dissolved/

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

withdrawn limited liability company