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### COVER LETTER

**TO:** Registration Section Division of Corporations

Vintages Wine Bar, LLC SUBJECT:	
Name of Limited Liability	Company
DOCUMENT NUMBER: L17000248540	
The enclosed Resignation of Registered Agent for a Limited for filing.	Liability Company and fee are submitted
Please return all correspondence concerning this matter to the	ne 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	
E-mail address: (to be used for future annual report notification)	-
For further information concerning this matter, please call:	
Kasandra Lund 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\$85,00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 provisions of section 605.0115, Florida Statutes, the unde	rsigned.
United States Corporation Agents, Inc.	, hereby resigns as
Name of Registered Agent	
Registered Agent for Vintages Wine Bar, LLC	
Name of Umited Liability Company	<u> </u>
L17000248540	
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 Signal CVi Resigning Agent	
If signing on behalf of an entity:	NOV 26 P
Cheyenne Moseley	
Typed or Printed Name	
Asst. Secretary for United States Corporation Ag	gents, Inc.
— Capacity	:

FILING FEES:

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Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company \$ 85.00 \$ 25.00

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