

L17000261608

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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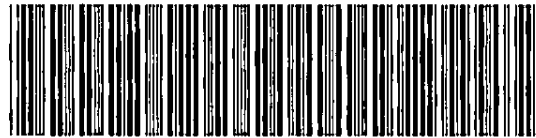
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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RA Resignation

APR 28 2020

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Cruz With Me Auto LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L17000261608

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:

Carole Wright
Name of Person

Myers & Wright PA
Name of Firm/Company

110 W. Reynolds St., Ste 110
Address

Plant City, FL 33563
City/State and Zip Code

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

For further information concerning this matter, please call:

Carole Wright at (813) 707-8838
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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DIVISION OF CORPORATIONS
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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,

Myers + Wright PA hereby resigns as
Name of Registered Agent

Registered Agent for Cruz With Me Auto LLC

Name of Limited Liability Company

LI7000261608

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.

Carol Wright
Signature of Resigning Agent

If signing on behalf of an entity:

Myers + Wright PA
Typed or Printed Name
CPA
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

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