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COVER LETTER

Registration Section Division of Corporations TO: FourTRD, LLC SUBJECT: Name of Limited Liability Company DOCUMENT NUMBER: L18000093562 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: Janna Pantoja Name of Person

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

INHS17 (2/14)

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ons of section 605.0115. Florida Statutes, the	undersigned,	12 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
United States Corporation Agents, Inc.		, hereby resigns as	
	Name of Registered Agent		
Registered Agent for	FourTRD, LLC		3
			<u>و</u>
	Name of Limited Liability Company		F . 6
L18000093562			
Document ?	Number, it known		
	tion was mailed to the above listed limited lia		
The agency is terminal	ted and the office discontinued on the 31st da Signature of Resigning 7		us statement is med.
If signing on behalf of	an entity:		
	Cheyenne Moseley		
	Typed or Printed Name		
	Asst. Secretary for United States Corporati	ion Agents, Inc.	
	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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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