# L180000146893

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: TICHBERRY TAMPA RE LLC  Name of Limited Liability Company
DOCUMENT NUMBER: 128000146893
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:
Fernando Franco Name of Person
Franco Law Firm, P.A.  Name of Firm/Company
268 Alhambra Cir, End Floor
Coral Gubles, FL 33134 City/State and Zip Code
Francolow Fim Pa. com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Fernando Franco at (786) 2915321  Name of Person at (786) 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

2022 SEP 15 AM 11:09



August 22, 2022

FERNANDO FRANCO FRANCO LAW FIRM, PA 268 ALHAMBRA CIR 2ND FLOOR CORAL GABLES, FL 33134

SUBJECT: FICHBERRY TAMPA RE LLC

Ref. Number: L18000146893

We have received your document for FICHBERRY TAMPA RE LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan Regulatory Specialist III

Letter Number: 122A00018663

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### STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisio	ns of section 605.011:	5, Florida Statut	es, the u	ndersigned,			
Franco la	W KM, PA			, hereby resign	is as		
	Name of Registered Ager	nt					
Registered Agent for	FICHBERRY	TAMPA	RE	LLC			
	Name of Lim	ited Liability Com	pany	<del></del>		,	
	6893						
Document No	ımber, if known						
A copy of this resignation	on was mailed to the a	bove listed limi	ited liabil	ity company at its	last known add	iress.	
The agency is terminate	d and the office disco	ntinued on the 3	·		Σ. ΓΑΙ	nent is f 2022 SEP 15	iled.
If signing on behalf of a	n entity:				LLAHASSEL		
	Т	yped or Printed Na	me			AM II: 03	O
		Capacity				w	

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