# L19000215863

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer.		
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Office Use Only



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# **COVER LETTER**

**TO:** Registration Section Division of Corporations

SUBJECT: Tiki Time Burgers and Thi	ngs LLC
Name of Limited Liability	Company
DOCUMENT NUMBER: L19000215863	
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	
raresignations@legalzoom.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
800 	773-0888
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 provisi	ions of section 605.0115, Florida Statutes, the undersi	gned.	
United States Corporation Agents, Inc.  Name of Registered Agent		, hereby resigns as	
<del></del>	Name of Limited Liability Company	·	
L19000215863			
Document ?	Number, if known		
	tion was mailed to the above listed limited liability conted and the office discontinued on the 31st day after the		
	Signature of Resigning Agent		
If signing on behalf of an entity:		. 2	
	Cheyenne Moseley	,	
	Typed or Printed Name		
	Asst. Secretary for United States Corporation Agent	s, Inc.	
	Capacity	<u></u>	

**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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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