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(₭€	equestor's Name)		
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SECRETABLY OF STATE

COVER LETTER

SUBJECT: Drift Away to Old Florida LLC Name of Limited Liability	
Name of Limited Liability	Company
DOCUMENT NUMBER: L20000298432	
The enclosed Resignation of Registered Agent for a Limited for filing.	d 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 Daytime Telephone Number
Name of Person Area Code	Daytime Telephone Number
Enclosed is a check made payable to the Florida Departmen liability company or \$25.00 for an administratively dissolve liability company.	t of State for \$85.00 for an active limited d, voluntarily dissolved or withdrawn limited

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

TO:

Registration Section Division of Corporations

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ons of section 605.0115. Florida Statutes, the under	signed,	==
United States Cor	poration Agents, Inc.	hereby resigns as	2021 DEC SECRE
Name of Registered Agent		thereby realigns as	EC-6
Registered Agent for Drift Away to Old Florida LLC			136 6 6
_			749 3
	Name of Limited Liability Company		AH 8: 39
L20000298432			F 6
Document N	Sumber, if known		
A copy of this resignat	ion was mailed to the above listed limited liability c	ompany at its last kr	nown address.
The agency is terminat	ed and the office discontinued on the 31st day after	the date on which th	nis statement is filed.
	Signature of Resigning Agent		
If signing on behalf of	an entity:		
	Cheyenne Moseley		
	Typed or Printed Name		
	Asst. Secretary for United States Corporation Age	nts, 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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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