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PICK-UP WAIT MAIL		
(D.)		
(Business Entity Name)		
(Document Number)		
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COVER LETTER

SUBJECT: Uptown MC LLC Nam	e of Limited Liability	/ Company	
DOCUMENT NUMBER: L20000389	1159		
The enclosed Resignation of Registered for filing.	Agent for a Limited	d Liability Company and fee are su	bmitted
Please return all correspondence concer	ning this matter to t	he following:	
Brenna Lutter			
Name of Person		-	
Business Filings Incorporated			
Name of Firm/Compan	y	-	
8020 Excelsior Drive Suite 200			
Address		-	
Madison, WI 53717			
City/State and Zip Cod	e	-	
E-mail address: (to be used for future annu	al report notification)	-	
For further information concerning this	matter, please call:		
Brenna Lutter	608	827-5300 Daytime Telephone Number	
Name of Person	Area Code	Daytime Telephone Number	

MAILING ADDRESS:

TO: Registration Section

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 provisions of section 605.0115. Florida Statutes, the	undersigned.
Business Filings Incorporated	, hereby resigns as
Name of Registered Agent	
Registered Agent for	
Name of Limited Liability Company	,
L20000389159	
Document Number, if known	
A copy of this resignation was mailed to the above listed limited lial. The agency is terminated and the office discontinued on the 31st day.	, , ,
Proposition of Resigning A	Agent
If signing on behalf of an entity;	
Bylora Lut Typed or Printed Name	ter
Asst Secretary for Business Filings Capacity	s Incorporated
### FILING FEES: \$ 85.00	s Incorporated SECONDARY OF STALL ARY OF ST

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314