L21000020638

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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: WRGUILDAY LLC Name of Limited Liability	y Company
DOCUMENT NUMBER: L21000020638	
The enclosed Resignation of Registered Agent for a Limite for filing.	ed Liability Company and fee are submitted
Please return all correspondence concerning this matter to	the following:
Chelsea Chapman	
Name of Person	_
Legaline Corporate Services, INC.	
Name of Firm/Company	_
10601 Clarence Dr Ste 250	
Address	_
Frisco, TX 75033-3867	
City/State and Zip Code	_
ra@legalinc.com	
E-mail address: (to be used for future annual report notification)	_
For further information concerning this matter, please call:	
Chelsea Chapman 844 at (386-0178
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ions of section 603.0113, Florida Statutes, the ur	idersigned,	
Legaline Corporate Ser	vices, INC.	, hereby resigns as	
· ·	Name of Registered Agent		
Registered Agent for	WRGUILDAY LLC		_
	Name of Limited Liability Company		
L21000020638			
Document l	Number, if known		
A copy of this resigna	tion was mailed to the above listed limited liabil	ity company at its last known addres	s.
The agency is termina	ted and the office discontinued on the 31st day a		is filed.
If signing on behalf of	an entity;	7	10V I 5
	Chelsea Chapman	<u> </u>	≥ (1)
	Typed or Printed Name On Behalf of Legaline Corporate Services, INC.		A
	Capacity		ν,

FILING FEES:

S 85.00 Active limited liability company
Administratively dissolved/voluntarily dissolved/withdrawn limited liability company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