

	(Requestor's Name)	_
	(Address)	_
	(Address)	_
	(City/State/Zip/Phone #)	_
PICK-UF	P WAIT MAIL	
	(Business Entity Name)	
	(Document Number)	_
Certified Copies	Certificates of Status	
Special Instructions	s to Filing Officer:	
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Resignation of Registered Agent for a **Limited Liability Company**

Capitol Corporate Services, Inc.

PO Box 1831 Austin, TX 78767

Phone; (800) 345-4647 Fax: (800) 432-3622

regagent@capitolservices com

Secretary of State **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

DATE: STATE: 2/8/2023 **FLORIDA**

REP UNIT:

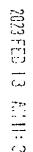
GOLD MUSIC, LLC

Enclosed for filing please find a Resignation of Registered Agent for a Limited Liability Company for the above referenced name, which is to be filed in your office. Enclosed is check # 33034 in the amount of \$85.00 for the filing fee. After filing, please return the file-stamped copy in the enclosed self-addressed envelope. If you have any questions please call (800) 345-4647 and ask for the Registered Agent Department.

Please return file-stamped copy to the following address:

Capitol Corporate Services, Inc. PQ Box 1831 Austin, TX 78767





STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provis	ions of section 605.0115, Florida Statutes, the undersigned,				
Capi	tol Corporate Services, Inc. , hereby resigns as				
-	Name of Registered Agent		_		
Registered Agent for	GOLD MUSIC, LLC				
L	Name of the Limited Liability Company				
L210	00069695				
Document	Number, if known				
A copy of this resigna	tion was mailed to the above listed limited liability company at its last known	addres	SS.		
The agency is termina	ted and the office discontinued on the 31st day after the date on which this sta	itemen'	t is file	d.	
	Sighandre of Resigning Agent				
If signing on behalf of	an entity:	(3)	20		
	Yvette Cleveland	71:5	153 53 71	g,	
	Typed or Printed Name	, • .] i	띯		
	Assistant Secretary		<u>۔۔۔</u>	1 - 17 - 12	
	Capacity		- Electric		
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			**	المد.	
	## FILING FEES: \$ 85.00	; i	(.)		-

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

