# L22000009824

(Re	questor's Name)	<u> </u>
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer	
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Office Use Only



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### **COVER LETTER**

Division of Corporations SUBJECT: Jay-Bird Towing and Transport LLC Name of Limited Liability Company DOCUMENT NUMBER: L22000009824 The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing. Please return all correspondence concerning this matter to the 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:

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

TO:

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 provision	ons of section 605.011	5, Florida Statutes, the unde	rsigned,		
United States Corporation Agents, Inc. , hereby		, hereby resigns as	eby resigns as		
		,			
Registered Agent for	lay-Bird Towing ar	nd Transport LLC			
					•
	Name of Lin	nited Liability Company			
L22000009824					
Document N	lumber, if known	<del></del>			
A copy of this resignat	ion was mailed to the :	above listed limited liability	company at its last	known address.	
The agency is terminate	ed and the office disco	ontinued on the 31st day afte	r the date on which	this statement is	filed.
		Signature of Resigning Agent			
If signing on behalf of	an entity:			202 125	
Cheyenne Moseley			2023 OCT 31 PH 4: 11 SECTO		
	Ţ	Typed or Printed Name		13	Lateral Section 1
Asst. Secretary for United States Corporation Agents, Inc.		jents, Inc.		0 ( )	
		Capacity		PH	( <del></del>
				20) <b>#</b>	
	<b>FILING</b> \$ 85.00 \$ 25.00	FEES: Active limited liability ed Administratively dissolve withdrawn limited liabili	ompany ed/ voluntarily disso ity company	1.0	•

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