L22000070703

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name)	
(D	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	





900417784829

10/31/23--01024--007 **35.00





COVER LETTER

Registration Section Division of Corporations _{SUBJECT:} 604 Ybor LLC Name of Limited Liability Company DOCUMENT NUMBER: L22000070703 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: Name of Person

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited

MAILING ADDRESS:

liability company.

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:

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisio	ns of section 605.0115. Florida Statutes, the unders	igned,
United States Corporation Agents, Inc. , hereby re-		paraby recions as
		icredy resigns as
Registered Agent for 6	04 Ybor LLC	
	Name of Limited Liability Company	
L22000070703		
Document No	imber, if known	
	on was mailed to the above listed limited liability cold and the office discontinued on the 31st day after t	
	Signature of Resigning Agent	20°
If signing on behalf of an entity:		7053 L C L C 1
Cheyenne Moseley		.)
Typed or Printed Name		
	Asst. Secretary for United States Corporation Ager	nts, Inc.
	Capacity	
		<u> </u>
	PH MIC PURS	

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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