# L 22-000 497094

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### COVER LETTER \_\_\_\_

TDP Investing LLC	
SUBJECT: TPR Investing LLC Name of Limited Liab	ability Company
DOCUMENT NUMBER: L22000497094	
The enclosed Resignation of Registered Agent for a Lir for filing.	imited Liability Company and fee are submitted
Please return all correspondence concerning this matter	er to the following:
United States Corporation Agents, Inc.	
Name of Person	
Legalzoom.com, Inc.	
Name of Firm/Company	
9900 Spectrum Dr.	2023 FEB 23
Address	——————————————————————————————————————
Austin, TX 78717	SSEE
City/State and Zip Code	E.F.L. E.F.L.
raresignations@legalzoom.com	ਜ਼ <b>ੇ ਹ</b>
E-mail address: (to be used for future annual report notification	ition)
For further information concerning this matter, please c	call:
at (	773-0888
Name of Person Area C	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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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 605.0115, Florida Statutes, the undersi	gned,
Name of Registered Agent		nereby resigns as
		10.120, 100. <b>5</b> .10 ta
Registered Agent for $\underline{\underline{T}}$	PR Investing LLC	
	Name of Limited Liability Company	<del></del> ,
L22000497094		
Document N	umber, if known	
	ed and the office discontinued on the 31st day after the Signature of Resigning Agent	he date on which this statement is filed
If signing on behalf of a	an entity:	PH 1: 35 OF STATE SSEE, FL
	Cheyenne Moseley	ਹੁ ਨੂੰ <b>ਲ</b>
	Typed or Printed Name	
	Asst. Secretary for United States Corporation Agen	its, Inc.
	Capacity	<del></del>

#### **FILING FEES:**

\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ withdrawn limited liability company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