123000213450

(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(Only-State / Elp/ Holle #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900433622369

07/24/24--01022--006 **25.00



07/24/24

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Big Dutchie Jamaican Cuisine LLC

Name of Limited Liability Company

DOCUMENT NUMBER: L23000218480

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	-		影っ	≅ €
raresignations@legalzoom.com			TATE	VH 8: 16
E-mail address: (to be used for future annual report n	otification)			
For further information concerning this matter, p	lease call:			
at (800	773-0888		
Name of Person	Area Code	Daytime Telephone No	ımber	-

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605	.0115, Florida Statutes, the unde	ersigned,	1		
United States Corporation Agents	s, Inc.	, hereby resigns as			
Name of Registered	Agent	_ , nereby resigns as	Į.		
Registered Agent for Big Dutchie Jan	naican Cuisine LLC				
		•			_
Name o	f Limited Liability Company				_'
L23000218480					
Document Number, if known		,			
A copy of this resignation was mailed to	the above listed limited liability	company at its last l	iji chown a	ıddress	
The agency is terminated and the office d	iscontinued on the 31st day afte	er the date on which	his state	ement i	is filed.
	Signature of Resigning Agent				
If signing on behalf of an entity:		}	25	(%)	
Erik Treutlein	ı		ASS L	-6.7	;
	Typed or Printed Name		in o	<u> </u>	2 - 2
Vice President on t	pehalf of United States Corporation A	igents, Inc.		<u>ლ</u>	
	Capacity	- 	∯	٥	
		•	l·		

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