

**M12000001337**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.  
Account Number : 110432003053  
Phone : (561)694-8107  
Fax Number : (561)694-1639

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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**LLC REGISTERED AGENT RESIGNATION  
STARBUS LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$85.00

2019 MAR 25 3:02 PM

2019 MAR 25 AM 9:47

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Starbus LLC

Name of Limited Liability Company

**DOCUMENT NUMBER:** M12000001337

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:

Erika A. Easter

Name of Person

Ungerlaw PC

Name of Firm/Company

11726 San Vicente Blvd., Suite 480

Address

Los Angeles, CA 90049

City/State and Zip Code

eteam@eminutes.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Erika A. Easter

Name of Person

at ( 310 ) 820-1000

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

\_\_\_\_\_  
Name of Registered Agent

, hereby resigns as

Registered Agent for Starbus LLC

\_\_\_\_\_  
Name of Limited Liability Company

M12000001337

\_\_\_\_\_  
Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

\_\_\_\_\_  
(Signature of Resigning Agent)

If signing on behalf of an entity:

Jeffrey Unger

\_\_\_\_\_  
Typed or Printed Name

President of eResidentAgent, Inc.

\_\_\_\_\_  
Capacity

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TALLAHASSEE, FL

### 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