

M1200000 2171

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

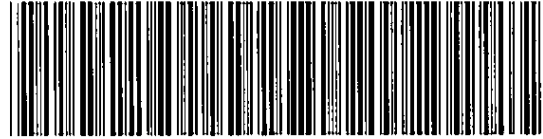
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TALLAHASSEE, FLORIDA

JUL 15 2019

T SCHROEDER

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CJUF III FLAGLER LLC

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

**DOCUMENT NUMBER:** M12000002171

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:

Krystal Beckner

\_\_\_\_\_  
Name of Person

COGENCY GLOBAL INC.

\_\_\_\_\_  
Name of Firm/Company

850 New Burton Rd., Suite 201

\_\_\_\_\_  
Address

Dover, DE 19904

\_\_\_\_\_  
City/State and Zip Code

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

For further information concerning this matter, please call:

Invoices Team

\_\_\_\_\_  
Name of Person

at ( 866 ) 621-3524

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

COGENCY GLOBAL INC.

, hereby resigns as

Name of Registered Agent

Registered Agent for CJUF III FLAGLER LLC

Name of Limited Liability Company

M12000002171

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.

*Krystal Beckner*

Signature of Resigning Agent

If signing on behalf of an entity:

Krystal Beckner

Typed or Printed Name

Assistant Secretary, COGENCY GLOBAL INC.

Capacity

FILED  
19 JUL -1 AM 9:00  
STATEMENT OF STATE  
OFFICE OF SECRETARY OF STATE

### 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