# M1600000673

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## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: CROSS DEVELOPMENT CC S	T PETERS	BURG 34, LLC	
Name of Lin	nited Liability	Company	-
DOCUMENT NUMBER: M16000000673			
The enclosed Resignation of Registered Agent for filing.	for a Limited	Liability Company and fee ar	re submitted
Please return all correspondence concerning this	s matter to th	ne following:	
Emily Smith			
Name of Person			
PARACORP INCORPORATED			_
Name of Firm/Company			2020 SEI
2804 Gateway Oaks Dr #100			ALC:
Address		•	29 E
Sacramento, CA 95833			SSS 3
City/State and Zip Code		•	2020 JUN 29 MH 10: 40 SECRETARY OF STATE STALLARIAS SEE, FL
E-mail address: (to be used for future annual report	notification)		
For further information concerning this matter,	please call:		
Emily Smith	(800	533-7272	
Name of Person	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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 provis	ions of section 605.0115.	Florida Statutes, the unde	ersigned,	
PARACORP INC	ORPORATED		, hereby resigns as	
	Name of Registered Agent		. Hereof redigina do	
Registered Agent for				
CROSS DEVELO	PMENT CC ST PET	ERSBURG 34, LLC		_
	Name of Limite	ed Liability Company		•
M16000000673				
Document	Number, if known			
A conv of this resigna	tion was mailed to the ab	ove listed limited liability	company at its last known address.	
The agency is termina		inued on the 31st day after	er the date on which this statement is	
If signing on behalf of an entity:			SEC SEC	2020
	Jody Moua		T. R.	2020 JUN 25
	Тур	oed or Printed Name		29
	Asst. Secretary fo	r Paracorp Incorpora	ated 6	
	EIL INC E	Capacity	SEC. FL	04 :01 HV
	FILING F \$ 85.00 \$ 25.00	Active limited liability of	company yed/ voluntarily dissolved/	

Make checks payable to Florida Department of State and mail to: **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Active limited liability company
Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company