15	1295	702	10
----	------	-----	----

O 01/27/2022 7:0€ AM 1/27/22, 9:05 AM pg 1 of 4



**Division of Corporations** 

→ 18506176383

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000035304 3)))



H220000353043A8CT

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Divi	sion	of	Со
<b>F</b> a.v.	NI	~ ~	

orporations Fax Number : (850)617-6383

From:

To:

S INC
1:

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

Email Address:

LLC REGISTERED AGENT RESIGNATION

G&R LIVE, LLC

-	
<b>1</b>	
ö	
ÅН	
-	
Ś	
JAN	
<b>~</b>	
2022	
è	
<b>~</b>	

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$85.00



Electronic Filing Menu Corporate Filing Menu

Help

H22000035304 3

### **COVER LETTER**

TO: Registration Section Division of Corporations

G&R LIVE, LLC SUBJECT:

Name of Limited Liability Company

# DOCUMENT NUMBER: M16000008542

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:

Zachary Ysais

Name of Person

Registered Agent Solutions, Inc.

Name of Firm/Company

1701 Directors Blvd., Suite 300

Address

Austin, TX 78744

City/State and Zip Code

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

For further information concerning this matter, please call:

Zachary Ysais	at (	000 )	705-7274
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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



AN 27 PM 2:

H22000035304 3

## STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

, hereby resigns as

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

Registered Agent Solutions, Inc.

Name of Registered Agent

Registered Agent for \_\_\_\_\_ G&R LIVE, LLC

Name of Limited Liability Company

M1600008542

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.

ure of Resigning Agent

If signing on behalf of an entity:

Mackenzie Hart

Typed or Printed Name Assistant Secretary, Registered Agent Solutions, Inc.

Capacity

#### FILING FEES:

\$ 85.00 \$ 25.00 Active limited liability company 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