

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

119000008936

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To:

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

From:

Account Name : REGISTERED AGENTS INC.  
Account Number : I20090000081  
Phone : (307)200-2803  
Fax Number : (813)436-5206

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

LLC REGISTERED AGENT RESIGNATION  
FORGOTTEN MONEY LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

K. SALY

MAR 15 2024

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

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

REGISTERED AGENTS, INC.,

hereby resigns as

Name of Registered Agent

Registered Agent for

**FORGOTTEN MONEY LLC**

Name of Limited Liability Company

**M19000008936**

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.

*David Roberts*

Signature of Resigning Agent

If signing on behalf of an entity:

Typed or Printed Name

Capacity

### 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\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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

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