

L12000055183

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

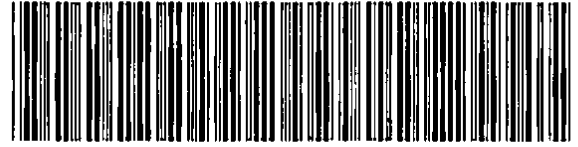
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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JUL 18 2019



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 5, 2019

THE FOLDING SLIDING DOOR COMPANY, LLC  
ATTN:BIANCA G LISTON  
111 N MAGNOLIA AVE SUITE 1200  
ORLANDO, FL 32801

SUBJECT: THE FOLDING SLIDING DOOR COMPANY, LLC  
Ref. Number: L12000055183

We have received your document for THE FOLDING SLIDING DOOR COMPANY, LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Yasemin Y Sulker  
Regulatory Specialist III

Letter Number: 319A00013619

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: The Folding Sliding Door Company, LLC  
Name of Limited Liability Company

DOCUMENT NUMBER: L12000055183

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:

Bianca G. Liston

Name of Person

McDonald Toole Wiggins

Name of Firm/Company

111 N. Magnolia Ave, Suite 1200

Address

Orlando, FL 32801

City/State and Zip Code

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

For further information concerning this matter, please call:

Bianca G. Liston

Name of Person

at ( 407 ) 246-1800

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Bianca G. Liston, hereby resigns as

Name of Registered Agent

Registered Agent for The Folding Sliding Door Company, LLC

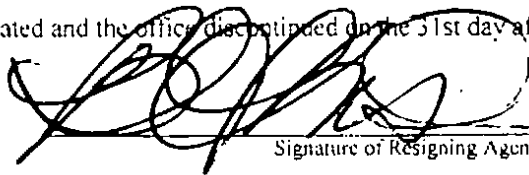
Name of Limited Liability Company

L12000055183

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

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2019 JUL 18 AM 9:10

If signing on behalf of an entity:

Bianca G. Liston

Typed or Printed Name

Registered Agent/Party  
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