# 45000 200511

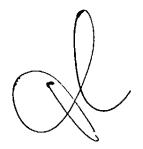
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| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
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| (Business Entity Name)                  |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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### **COVER LETTER**

SUBJECT: MDW Consulting Services, LLC

Name of Limited Liability Company

DOCUMENT NUMBER: L15000200511

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:

United States Corporation Agents, Inc.

| Name of Firm/Company   | ੇਵ<br>ਹਵਾ                               |
|--|---|
| 9900 Spectrum Dr.  |   |
| Address  | HAS                                     |
| Austin, TX 78717   | S C C C C C C C C C C C C C C C C C C C |
| City/State and Zip Code  | <u>س</u> <del>ک</del><br>تس             |
| raresignations@legalzoom.com                                       |   |
| E-mail address: (to be used for future annual report notification) | -                                       |
| For further information concerning this matter, please call:       |   |
| 800<br>at (  | 773-0888                                |
| 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

**TO**: Registration Section

Legalzoom.com, Inc.

Division of Corporations

Name of Person

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 under    | signed,                             |        |
|-------------------------|--|-------------------------------------|--------|
| United States Co.       | rporation Agents, Inc.                                   | hereby resigns as                   |        |
|                         | Name of Registered Agent                                 | nereby resigns as                   |        |
| Registered Agent for    | MDW Consulting Services, LLC                             |                                     |        |
|                         | Name of Limited Liability Company                        | ,                                   |        |
| L15000200511            |  |                                     |        |
| Document                | Number, if known   |                                     |        |
| A copy of this resigna  | tion was mailed to the above listed limited liability of | ompany at its last known address.   |        |
| The agency is termina   | ted and the office discontinued on the 31st day after    | the date on which this statement is | filed. |
|                         | Signature of Resigning Agent                             | 2023 FEB 22 SEUNCIARI TALLAHA       |        |
| If signing on behalf of | an entity:   |                                     | Y      |
|                         | Cheyenne Moseley   | ARY ARAS                            |        |
|                         | Typed or Printed Name                                    | Sept.                               | 77     |
|                         | Asst. Secretary for United States Corporation Age        | SEE FI                              | j      |
|                         | Capacity   |                                     |        |

FILING FEES:

\$ 85.00 Active limited liability company
\$ 25.00 Administratively 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