L20 000 187584

(Re	questor's Name)			
(Ad	dress)			
`	·			
(Ad	dress)			
(Cit	y/State/Zip/Phone #			
PICK-UP	☐ WAIT	MAIL		
	_			
(Bu	siness Entity Name)	1		
	cument Number)			
(50	ouncil Humbery			
Certified Copies Certificates of Status				
Special Instructions to	Filing Officer:			





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06/15/22--01008--007 **25.00





COVER LETTER

TO:	Registration Section Division of Corporations	<i>:</i>
SUBJ	ECT: ROOFTECH NY L.L.C. Name of Limited Liability	Company
DOC	JMENT NUMBER: L20000187584	
	nclosed Resignation of Registered Agent for a Limited	Liability Company and fee are submitted
Pleasc	return all correspondence concerning this matter to th	e following:
Unite	d States Corporation Agents, Inc.	
_	Name of Person	
Lega	Izoom.com, Inc.	
	Name of Firm/Company	
9900	Spectrum Dr.	
	Address	
Aust	n, TX 78717	
	City/State and Zip Code	
	ignations@legalzoom.com	
1	-mail address: (to be used for future annual report notification)	
For fu	rther information concerning this matter, please call:	
	at (800	773-0888) Daytime Telephone Number
	Name of Person Area Code	Daytime Telephone Number

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 provision	ons of section 605.0115	o, Fiorida Statutes, the und	ersigned.			
United States Corp	poration Agents, Inc	c	_ , hereby resigns as	1		
	Name of Registered Agen					
Registered Agent for _	ROOFTECH NY L.I	C.				-
<u>. </u>		ited Liability Company				<u> </u>
L20000187584						
<u> </u>	lumber, if known					
A copy of this resignat	ion was mailed to the a	bove listed limited liabilit	y company at its last	t known a	iddress	;.
The agency is terminat	ed and the office disco	Signature of Resigning Agen		n this state	ement	is filed.
If signing on behalf of	an entity:					
	Cheyenne Mose	eley				
		yped or Printed Name				
	Asst. Secretary for U	Inited States Corporation	Agents, Inc.			
		Capacity				
	FILING \$ 85.00 \$ 25.00	FEES: Active limited liability Administratively disso withdrawn limited liab	company Ived/ voluntarily dis oility company	SSEE SSEE	2022 JUN 15 1	FILE
	Make checks paya	ble to Florida Department Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	of State and mail to:	E STATE FLORIDA	AM 10: 50	D