L18 000 050 705

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone i	#)
PICK-UP WAIT	MAIL
(Business Entity Name	<u> </u>
(Document Number)	
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COVER LETTER

TO: Registration Section Division of Corporations

_{suвјест:} Johna (Cleaning & Disinfecting Service, LLC
-	Name of Limited Liability Company
DOCUMENT NUMBER	:L18000050705
The enclosed Resignation for filing.	of Registered Agent for a Limited Liability Company and fee are submitted
Please return all correspor	dence concerning this matter to the following:
United States Corporat	on Agents, Inc.
Nan	ne of Person
Legalzoom.com, Inc.	
Name o	Firm/Company 2
9900 Spectrum Dr.	Firm/Company 2 3
	Address $\overline{\omega}$
Austin, TX 78717	A II
City/Sta	te and Zip Code
raresignations@legalzo	om.com
E-mail address: (to be use	for future annual report notification)
For further information co	ncerning this matter, please call:
	at () 773-0888
Name of Pe	rson Area Code Daytime Telephone Number
Enclosed is a check made liability company or \$25.0 liability company.	payable to the Florida Department of State for \$85.00 for an active limited 0 for an administratively dissolved, voluntarily dissolved or withdrawn limited
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

INHS17 (2/14)

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of	section 605.0115, Florida Statutes, the undersigned,		
United States Corporati	on Anents Inc		
Name	of Registered Agent hereby resigns as		
Registered Agent for Johna	Cleaning & Disinfecting Service, LLC		
	Name of Limited Liability Company		
L18000050705			
Document Number,	if known		
A copy of this resignation wa	s mailed to the above listed limited liability company at its last known a	ıddress	i.
The agency is terminated and	the office discontinued on the 31st day after the date on which this state	ement	is filed
	Signature of Resigning Agent	2;	-
If signing on behalf of an enti	y:	22 OCT 13	Palkathy of the Application
Ch	l eyenne Moseley	$\overline{\omega}$	
	Typed or Printed Name		<u> </u>
Ass	Secretary for United States Corporation Agents, Inc.	5: 0). 1e = 17
	Capacity	0_	= , ·
	FILING FEES: \$ 85.00 Active limited liability company \$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company		
M.	ake checks payable to Florida Department of State and mail to: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		