

202000008197

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

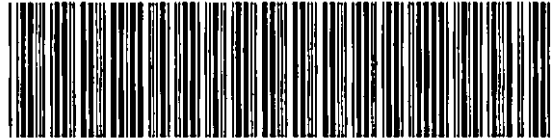
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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APR 17 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Slusser Services, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L08000008197

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:

Name of Person

Slusser Services, LLC

Name of Firm/Company

3627 Progress Ave
Address

Naples, FL 34104

slussernaples@gmail.com

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

For further information concerning this matter, please call:

Kenneth Slusser at (239) 263 0720

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Red Earth Group, Inc

Name of Registered Agent

, hereby resigns as

Registered Agent for Slusser Services, LLC

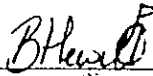
Name of Limited Liability Company

L08000008197

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

If signing on behalf of an entity:

Ben Hewitt

Typed or Printed Name

CEO

Capacity

18 APR 12 PM 4:49
RECEIVED
FLORIDA

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