# L0900033584

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificates	s of Status	
Special Instructions to Filing Officer:			

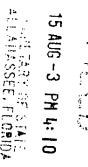
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06/01/15--01041--003 \*\*80.00

08/19/15--01006--003 \*\*5.00



AUG 1 9 2015 Y SULKER

#### **COVER LETTER**

TO: Registration Section Division of Corporations

Clean Wash, LLC SUBJECT:	
Name of Limited Liability	Company
DOCUMENT NUMBER: L090000033584	
The enclosed Resignation of Registered Agent for a Limited for filing.	Liability Company and fee are submitted
Please return all correspondence concerning this matter to the	ne following:
Cornelious James Bellamy, Sr.	
Name of Person	•
Clean Wash, LLC	
Name of Firm/Company	
1616 Mosher Drive	
Address	•
Orlando, Florida	
City/State and Zip Code	
CJ@pluswash.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Cornelious James Bellamy, Sr. 321	271-4497
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

INHS17 (2/14)



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SEGRETART OF STATE TALLAHASSEE, FLORIDA

# Division of Corporations

June 10, 2015

CORNELIOUS JAMES BELLAMY, SR 1616 MOSHER DR ORLANDO, FL

SUBJECT: CLEAN WASH, LLC Ref. Number: L09000033584

We have received your document for CLEAN WASH, LLC and check(s) totaling \$80.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$5.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

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) 245-6051.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 815A00012002

## STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ons of section 605.0115, Florida Statutes, the undersig	med,
CT Corporation Sy	ystems h	ereby resigns as
	Name of Registered Agent	
Registered Agent for	Clean Wash, LLC	<u>i                                     </u>
	Name of Limited Liability Company	
L090000033584	·	
Document N	Number, if known	_
	tion was mailed to the above listed limited liability conted and the office discontinued on the 31st day after th	
	Dr M	Sin a f
,	Signature of Resigning Agent	Es F
If signing on behalf of	an entity:	
	Jordan Brown	»·
	Typed or Printed Name	
	Assistant Secretary	
	Capacity	

Active limited liability company
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