

L09 0000 47528

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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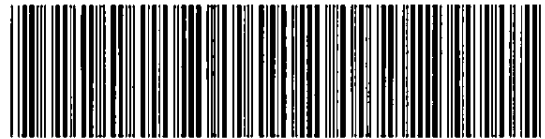
(Business Entity Name)

(Document Number)

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CT Corporation

28 Liberty St.
New York, NY 10005

Phone (212) 894 8940
www.ct.wolterskluwer.com
www.wolterskluwer.com

February 26, 2024

Department of State Division of Corporations
Registration Section
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

RE: Resignation of Agent for: EZ Portable Power, LLC

Dear Sir or Madam:

We enclose herewith a Statement of Resignation of Registered Agent for a Limited Liability Company, by the agent for service of process for the above named company. Also enclosed is our check in the amount of \$85.00 each to cover the filing fee.

Please advise us once the resignation of agent has been filed and issue whatever evidence of filing that may be usual. We have also enclosed a stamped self-addressed envelope for your convenience in replying or you can email me at my email address below.

Very truly yours,

C T Corporation System

Marie Hauer, Assistant Secretary
On behalf of Corpdirect Agents, Inc.
marie.hauer@wolterskluwer.com

Enclosure

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EZ PORTABLE POWER, LLC

Name of Limited Liability Company

DOCUMENT NUMBER: L09000047528

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:

Marie Hauer

Name of Person

C T Corporation System

Name of Firm/Company

28 Liberty St.

Address

New York, NY 10005

City/State and Zip Code

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

For further information concerning this matter, please call:

Marie Hauer

Name of Person

at (212) 894-8940
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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,

Corpdirect Agents, Inc.

, hereby resigns as

Name of Registered Agent

Registered Agent for EZ PORTABLE POWER, LLC

Name of Limited Liability Company

L09000047528

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.

By: Marie Hauer Corpdirect Agents, Inc.

Signature of Resigning Agent

If signing on behalf of an entity:

Marie Hauer

Typed or Printed Name

Asst. Secy.

Capacity

2024 MAR 21 AM 11:23

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