

109 000078184

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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FEB 02 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RICHARD AND RICE CONSTRUCTION LLC

Name of Limited Liability Company

DOCUMENT NUMBER: L09000078184

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:

Kyle W. Ohlenschlaeger, Esq.

Name of Person

Loren & Kean Law

Name of Firm/Company

7111 Fairway Drive, Suite 302

Address

Palm Beach Gardens, FL 33418

City/State and Zip Code

n/a

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

For further information concerning this matter, please call:

Kyle E. Ohlenschlaeger

at (561) 615-5701

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

HOLLY RICE _____, hereby resigns as

Name of Registered Agent

Registered Agent for RICHARD AND RICE CONSTRUCTION LLC _____

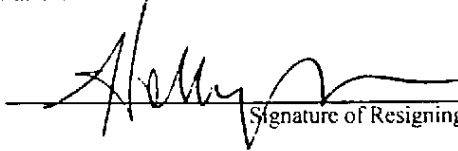
Name of Limited Liability Company

L09000078184 _____

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 Holly Rice

If signing on behalf of an entity:

Typed or Printed Name

Capacity

FILED
2022 FEB 13 PM 1:51
TALLAHASSEE, FL
FLORIDA DEPARTMENT OF STATE

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