

Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

L09000084516

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(((H24000026165 3)))



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To: Division of Corporations
 Fax Number : (850)617-6363

From: Account Name : A1A REGISTERED AGENT INC.
 Account Number : E20090000032
 Phone : (561)792-2236
 Fax Number : (561)202-8082

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 SECRETARY OF STATE
 TALLAHASSEE, FL
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**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

RECEIVED
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 DEPT. OF STATE
 DIVISION OF CORPORATIONS
 TALLAHASSEE, FLORIDA

**LLC REGISTERED AGENT RESIGNATION
 EST AMERICA LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

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STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

A1A REGISTERED AGENT INC. _____, hereby resigns as
Name of Registered Agent

Registered Agent for EST AMERICA LLC
Name of Limited Liability Company

1.09000084516
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.

Tina Makl
Signature of Resigning Agent

If signing on behalf of an entity:

TINA MAKI
Typed or Printed Name
DP
Capacity

FILING FEES:

- \$ 85.00 Active limited liability company
- \$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

FILED
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TALLAHASSEE, FL

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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