

LD9000110273

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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2023 JUN 20 PM 3:03
CLERK OF STATE
TALLAHASSEE, FL

M

RYAN M. MYNARD

ATTORNEY AT LAW, P.A.

January 12, 2023

Registration Section
Division of Corporation
P.O. Box 6327
Tallahassee, FL 32314

RE: Morgan Disposal, LLC
Document No. L09000110273

To whom it may concern:

Please find the attached documents for your review and processing:

1. Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Companies;
2. Statement of Resignation of Registered Agent for a Limited Liability Company; and
3. Dissociation or Resignation of Member/Manager from a Florida or Foreign Limited Liability Company.

I am including a check for \$135.00 to cover the filing of all the documents.

Sincerely,



Ryan M. Mynard

Enclosures

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Morgan Disposal, LLC

Name of Limited Liability Company

DOCUMENT NUMBER: L09000110273

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:

Ryan Mynard

Name of Person

RyanM. Mynard, Attorney at Law, P.A.

Name of Firm/Company

420 East Pine Avenue

Address

Crestview, FL 32536

City/State and Zip Code

ryan@crestviewlawfirm.com

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

For further information concerning this matter, please call:

Ryan Mynard

at (850) 683-3940

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Jamie Meager _____, hereby resigns as

Name of Registered Agent

Registered Agent for Morgan Disposal, LLC

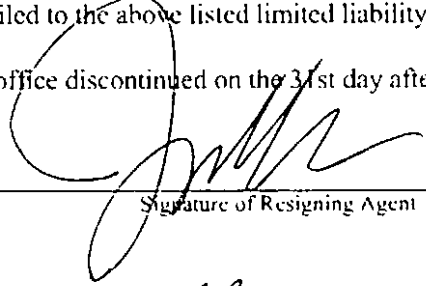
Name of Limited Liability Company

L09000110273

Document Number, if known

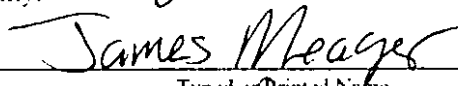
A copy of this resignation was mailed to the above listed limited liability company at its last known address.

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:



Typed or Printed Name


Owner/President

Capacity

FILED
2023 JAN 20 PM 3:03
SECRETARY OF STATE
TALLAHASSEE, FL

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