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Certified Copies	Certificates of Status
Special Instructions to Filing Officer:	
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TO: Registration Section Division of Corporations

## SUBJECT: LEADING INNOVATIONS, LLC

Name of Limited Liability Company

## DOCUMENT NUMBER: L11000086218

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:

Nicole Williams

Name of Person

**URS Agents, LLC** 

Name of Firm/Company

3675 Crestwood Parkway Suite 350

Address

Duluth, GA 30096

City/State and Zip Code

#### resignations@urscompliance.com

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

For further information concerning this matter, please call:

URS Agents, LLC

Name of Person

at (<u>800</u>)5674397 Area Code Davtime Telephone Number

Enclosed is a check made payable to the Florida Department of State for S85.00 for an active limited liability company or S25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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)

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

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

URS Agents, LLC

\_\_\_\_\_, hereby resigns as

. <sup>\*</sup>.

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Name of Registered Agent

Registered Agent for LEADING INNOVATIONS, LLC

Name of Limited Liability Company

L11000086218

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:

Edwardo Saldana

Typed or Printed Name

Manager

Capacity

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withdrawn limited liability company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