

L12 0000 3617

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COVER LETTER

SUBJECT: Britannia Solutions LLC

Name of Limited Liability Company

DOCUMENT NUMBER: L12000036117

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:

United States Corporation Agents, Inc.

Name of Person

Legalzoom.com, Inc.

Austin, TX 78717

9900 Spectrum Dr.

TO:

City/State and Zip Code

Address

Name of Firm/Company

raresignations@legalzoom.com

Registration Section
Division of Corporations

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

For further information concerning this matter, please call:

Name of Person at (800) 773-0888

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 s	ection 605.011	5. Florida Statutes, the unders	signed,	
United States Corporation	hereby resigns as			
Name	nereby resigns as			
Registered Agent for Britann	nia Solutions	LLC		
	Name of Lin	nited Liability Company		,
L12000036117				
Document Number, if	`known			
A copy of this resignation was	mailed to the a	above listed limited liability co	ompany at its last known ε	iddress.
The agency is terminated and t		ontinued on the 31st day after the Trautlain Signature of Resigning Agent	he date on which this state	ement is filed.
f signing on behalf of an entity	v:			
Erik	Treutlein			2024 (***)
	T	yped or Printed Name		(; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;
Vice P	resident on beha	If of United States Corporation Age	ents, Inc.	<u>သ</u>
		Capacity		
				= = = = = = = = = = = = = = = = = = = =
				4 : 2
	FILING \$ 85.00 \$ 25.00	FEES: Active limited liability com Administratively dissolved, withdrawn limited liability	ipany voluntarily dissolved/ company	<u></u>

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