

L12000068688

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

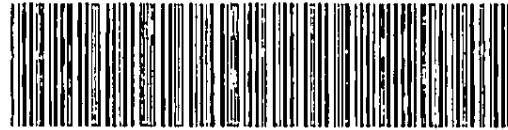
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

17-NOV-2-PM-2-20

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 20, 2017

BEVON CHRISTIE
403 NW 68TH AVENUE
UNIT 118
PLANTATION, FL 33317 US

SUBJECT: ENERGETIC ELECTRIC SERVICE, LLC

-Ref: Number: L12000068688

We have received your document for ENERGETIC ELECTRIC SERVICE, LLC and your check(s) totaling \$85.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

An individual must sign on behalf of the business entity you have designated as the registered agent.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 254-6051.

Judy A Leggett
Regulatory Specialist II
Registration Section

Letter Number: 217A00021224

2017 NOV -2 AM 11:03

FILED 2017 NOV 20 11:03 AM

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ENERGETIC ELECTRIC SERVICE, LLC

Name of Limited Liability Company

DOCUMENT NUMBER: L12000068688

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:

BEVON CHRISTIE

Name of Person

1224 (2004), INC.

Name of Firm/Company

403 NW 68TH AVENUE, SUITE 118

Address

PLANTATION, FL 33317

City/State and Zip Code

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

For further information concerning this matter, please call:

BEVON CHRISTIE

Name of Person

at (954) 895-7412

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 section 605.0115, Florida Statutes, the undersigned,
1224 (2004), INC.

Name of Registered Agent

_____, hereby resigns as

Registered Agent for ENERGETIC ELECTRIC SERVICE, LLC

Name of Limited Liability Company

L12000068688

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:

BEVON CHRISTIE

Typed or Printed Name

ORIGINAL REGISTERED AGENT

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