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JUL 2 1 2018

COVER LETTER

Name	of Limited Liabil	ity Company
DOCUMENT NUMBER: L120001516	503	
		ed Liability Company and fee are submitted
Please return all correspondence concerni	ing this matter to	the following:
RALF F HEYER		
Name of Person		
HEYER & ASSOCIATES EA PA		
Name of Firm/Company		_
299 ALHAMBRA CIRCLE, SUITE 31	2	
Address		_
CORAL GABLES, FL 33134		
City/State and Zip Code		<u> </u>
SUPPORT@HEYERINC.COM		
E-mail address: (to be used for future annua	l report notification)
For further information concerning this n	natter, please call	l:
RALF F HEYER	786	693-9358
Name of Person	Area Co	693-9358 Daytime Telephone Number

MAILING ADDRESS:

Registration Section Division of Corporations

TO:

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 un	dersigned.	
HEYER & ASSOCIATES EA PA	hereby resigns as	
Name of Registered Agent		
Registered Agent for MIAMI EMERGENCY PLUMBING LLC		
Name of Limited Liability Company	· · · · · · · · · · · · · · · · · · ·	
L12000151603		
Document Number, if known		
A copy of this resignation was mailed to the above listed limited liability. The agency is terminated and the office discontinued on the blst day a Signature of Resigning Agen	fter the date on which this statement is filed.	
If signing on behalf of an entity:	EPP E D	
RALF F HEYER	D IN SI	
Typed or Printed Name		
REGISTERED AGENT		
Capacity		

FILING FEES:

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Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company \$ 85.00 \$ 25.00