

L14000132878

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

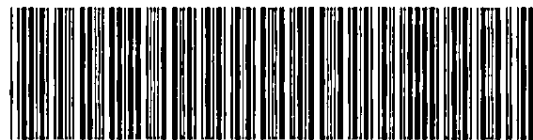
(Business Entity Name)

(Document Number)

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ALABAMA SECRETARY OF REVENUE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RESIGNATION OF REGISTERED AGENT

Name of Limited Liability Company

DOCUMENT NUMBER: L14000132878

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:

ELAINE OLIVEIRA

Name of Person

GENESIS TAX HOUSE

Name of Firm/Company

411 SE MIZNER BLVD STE 72

Address

BOCA RATON, FLORIDA 33432

City/State and Zip Code

ELAINE.OLIVEIRA@GENESISTAXHOUSE.COM

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

For further information concerning this matter, please call:

ELAINE OLIVEIRA

Name of Person

at (954)
Area Code

782-4000

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

GENESIS TAX HOUSE OF FLORIDA LLC, hereby resigns as

Name of Registered Agent

Registered Agent for A&P DOMOS LLC

Name of Limited Liability Company

L14000132878

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:

GENESIS TAX HOUSE OF FLORIDA LLC

Typed or Printed Name

MANAGER/MEMBER

Capacity

2021 JUN 29 PM 1:19
FLORIDA
131

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