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JUL 28 2018

#### **COVER LETTER**

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SUBJECT: GEORGES DISCOUNT LANDSCAPING LI	
DOCUMENT NUMBER: L14000151032	
The enclosed Resignation of Registered Agent for a Limited for filing.	Liability Company and fee are submitted
Please return all correspondence concerning this matter to the	ne following:
Chelsea Haire	
Name of Person	
Legalinc Corporate Services, Inc.	1 <b>2</b> 2
Name of Firm/Company	AGE TO
10601 Clarence Drive, Suite 250	ZIII JUL ZI
Address	
Frisco, TX 75033	PH 4: 42 EFLORIDA
City/State and Zip Code	
treesandthingsllc@gmail.com	0e <b>2</b>
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Chelsea Haire 844	386-0178
Name of Person Area Code	Daytime Telephone Number
Enclosed is a check made payable to the Florida Department liability company or \$25.00 for an administratively dissolved liability company.	t of State for \$85.00 for an active limited d. voluntarily dissolved or withdrawn limited

## 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 provision	ns of section 605.011	5, Florida Statutes, the und	dersigned,			
Legalinc Corporate Services, Inc.			, hereby resigns :	recions as		
	Name of Registered Age	ent		4.7		
Registered Agent for G	EORGES DISCO	OUNT LANDSCAPING	LLC			_
	Name of Lin	nited Liability Company				
		, , ,				
L14000151032						
Document Nu	mber, if known	<del></del>				
A copy of this resignatio	on was mailed to the	above listed limited liabilit	y company at its la	ist known ac	ddress	•
l'he agency is terminated	and the office disco	ontinued on the 31st day af	W	ch this state	ment i	is filed.
It signing on behalf of ar	nentity:					
		Chelsea Haire		TAL OF	20 <b>18</b>	
	Т	Typed or Printed Name		두 주문		77
	on Behalf of Leg	galinc Corporate Servi	ices, Inc.	3.5	2 ]	Carrier.
		Capacity		338	£-	
				. <del></del> .		111
	EU WO	rrec		ORI	<b>4: 42</b>	
	FILING \$ 85.00 \$ 25.00	Active limited liability Administratively dissol withdrawn limited liab	ved/ voluntarily di	ORIDA d	2	

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