L15000190287

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		





600328404436

05/03/19--01032--012 **20.00 06/17/19--01016--003 **5.00

APPROVED FILED

T GLASS JUN 17 2019



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 15, 2019

UNITED STATES CORPORATION AGENTS, INC. 9900 SPECTRUM DR. AUSTIN, TX 78717

SUBJECT: CARL BARBERA & ANN POOLER, LLC

Ref. Number: L15000190287

We have received your document for CARL BARBERA & ANN POOLER, LLC and your check(s) totaling \$20.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a balance due of \$5.00.

Please return 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) 245-6052.

Tacarri K Glass Regulatory Specialist II

Letter Number: 919A00009850

AROVED FILED

RECEIVED
JUN 1 0 2019

COVER LETTER

CARL BARBERA & ANN POOLER, LLC Name of Limited Liability Company DOCUMENT NUMBER: L15000190287 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. Name of Firm/Company 9900 Spectrum Dr. Address Austin, TX 78717 City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Kasandra Lund Name of Person

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

TÖ:

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 provisio	ons of section 605,0115. Florida Statutes, the unders	igned.	
United States Corporation Agents, Inc		hereby resigns as	
	Name of Registered Agent	•	
Registered Agent for	CARL BARBERA & ANN POOLER, LLC		
	Name of Limited Enability Company		·
L15000190287			
Document N	umber, if known		
	on was mailed to the above listed limited liability of		
The agency is terminate	ed and the office discontinued on the 31st day after	the date on which this statement	is filed.
	Signature of Resigning Agent	7019 JUN 1	<u> </u>
If signing on behalf of an entity:			一定學業
	Cheyenne Moseley	PR	- G02
	Typed or Printed Name	on on	<u>(_ </u>
	Asst. Secretary for United States Corporation Age	: N	
	Capacity	00	

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