

L15200204791
 Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

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Division of Corporations
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Account Name : CORP USA
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

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To: Division of Corporations
Fax Number : (850)617-6393

From: Account Name : CORP USA
Account Number : 072450003255
Phone : (305)634-3694
Fax Number : (305)633-9696

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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**LLC REGISTERED AGENT RESIGNATION
CONTROTEL, LLC**

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Corporate Filing Menu

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1/19/2017

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FAX NO./NAME	18506176393
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TIME : 01/19/2017 15:43
NAME : CORP USA
FAX : 3056339696
TEL : 18084323028
SER.# : BRO66J607737

TRANSMISSION VERIFICATION REPORT

2

4700007800

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,
CHRISTIAN VALDIVIESO, hereby resigns as

Name of Registered Agent

Registered Agent for **CONTROTEL, LLC**

Name of Limited Liability Company

L15000204791

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:

CHRISTIAN VALDIVIESO

Typed or Printed Name

RESIDENT 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withdrawn limited liability company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

HS17 (2/14)

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