L16000001360

(Requestor's Name)
(Address)
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(Address)
(City/Chata-Tis/Dhana 40
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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2021 MAY -3 PM 12: 29

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COVER LETTER

SUBJECT:	
Name of Limited Liability Company	
DOCUMENT NUMBER: L16000001360	
The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitte for filing.	d
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	
101 North Brand Blvd. 11th Floor	
Address	
Glendale, CA 91203	
City/State and Zip Code	
raresignations@legalzoom.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Name of Person at (800) 773-0888 Area Code 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

INHS17 (2/14)

TO:

Registration Section Division of Corporations

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions	s of section 605.011	5, Florida Statutes, the unde	ersigned,			
United States Corpo	hereby resigns as					
1						
Registered Agent for Co	rbett Maritime, l	LC				
						-
	Name of Lin	nited Liability Company			_	_,
L16000001360						
Document Num	ber, if known					
A copy of this resignation	was mailed to the	above listed limited liability	company at its last k	nown a	ddress.	
		ontinued on the 31st day afte				
-		Signature of Resigning Agent				
If signing on behalf of an e	entity:					
(Cheyenne Mose	eley		N.	29	
_		yped or Printed Name			2021 MAY	
Α	Asst. Secretary for U	Inited States Corporation Ag	ents, Inc.	≥ //	3	
		Capacity		458	Y -3	
	FILING \$ 85.00 \$ 25.00	FEES: Active limited liability co Administratively dissolve withdrawn limited liabili	mpany d/ voluntarily dissol ty company	EE. FLORIDIZ	3 PM 12: 29	D

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