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COVER LETTER

SUBJECT: Stepping Stones Commu	e of Limited Liabi	lity Company
DOCUMENT NUMBER: L16000132	334	
The enclosed Resignation of Registered for filing.	Agent for a Limi	ted Liability Company and fee are submitted
Please return all correspondence concern	ning this matter to	the following:
Jeremy Levin		
Name of Person		
Stepping Stones Community Solution	ns LLC	
Name of Firm/Compan	y	
702 51st Street East Unit 1516 A		
Address		<u> </u>
Bradenton, FL 34208		
City/State and Zip Cod	2	
jeremylevin@live.com		
E-mail address: (to be used for future annu	al report notification	1)
For further information concerning this	natter, please cal	l:
Jeremy Levin	727	768-1747 de Daytime Telephone Number
Name of Person	Area Co	de Daytime Telephone Number

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 provisions of section 605.0115, Florida Statutes.	the undersigned,
Aaron J Mohr	, hereby resigns as
Name of Registered Agent	
Registered Agent for Stepping Stones Community Solut	
	52, 52
Name of Limited Liability Compan	y E
L16000132334	
Document Number, if known	
A copy of this resignation was mailed to the above listed limited	I liability company at its last known address.
The agency is terminated and the office discontinued on the 31s	t day after the date on which this statement is filed.
On J. Me	
Signature of Resigni	ng Agent
If signing on behalf of an entity:	
Typed or Printed Name	
Capacity	

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

FILING FEES:
\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company