# 14000185398

(R	Requestor's Name)
(A	Address)
A)	Address)
(C	City/State/Zip/Phone #)
PICK-UP	
(B	Business Entity Name)
(D	Document Number)
Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer:
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RA Risignation



**TO:** Registration Section Division of Corporations

## SUBJECT: MARCO RENTAL, LLC

Name of Limited Liability Company

### DOCUMENT NUMBER: L16000185398

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

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:

Kasandra Lund

Name of Person

at (1800) 773-0888 x3951 Area Code Daytime Telephone Number Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited elability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn is limited liability company.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



# STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

Name of Registered Agent

United States Corporation Agents, Inc.

, hereby resigns as

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Registered Agent for MARCO RENTAL, LLC

Name of Limited Liability Company

L16000185398

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:

Cheyenne Moseley

Typed or Printed Name

Asst. Secretary for United States Corporation Agents, Inc.

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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