## 116000 188407

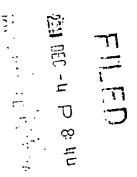
(Requestor's	Name)
(Address)	
(Address)	
(City/State/Zi	p/Phone #)
PICK-UP W	AIT MAIL
(Business Er	ntity Name)
(Document N	lumber)
Certified Copies Cel	rtificates of Status
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TO: Registration Section Division of Corporations

5 Stars Marketing LLC SUBJECT:	
Name of Limited Liability	Company
DOCUMENT NUMBER: L16000188407	
The enclosed Resignation of Registered Agent for a Limited for filing.	I Liability Company and fee are submitted
Please return all correspondence concerning this matter to the	ne following:
Kent Rockwell	
Name of Person	-
Universal Registered Agents, Inc.	
Name of Firm/Company	-
PO Box 23788	. na.
Address	
Overland Park, KS 66283	
City/State and Zip Code	= 7
krockwell@uragents.com	· · · · · · · · · · · · · · · · · · ·
E-mail address: (to be used for future annual report notification)	89. 
For further information concerning this matter, please call:	;**
Kent Rockwell 855	236-9172
Name of Person 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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

Pursuant to the provision	s of section 605.011	15, Florida Statutes, t	the undersigned.		
Jniversal Registered Agents, Inc.		, hereby resig	yns as		
	Name of Registered Age	ent		,	
Registered Agent for $\frac{5.5}{2}$	Stars Marketing	LLC			
	Name of Lit	nited Liability Company			
L16000188407					
Document Nur	nber, if known	<del></del>			
A copy of this resignatio	n was mailed to the	above listed limited	liability company at i	ts last known addr	ess.
The agency is terminated	and the office disco	Signature of Resignin		which this stateme	ent is filed
If signing on behalf of ar	entity:				
	Kent Rockwell			DEC	
	CEO	Typed or Printed Name		H- 3	三
·		Capacity		D 8 H	ö
	FILINC \$ 85.00 \$ 25.00	Active limited lia Administratively	ability company dissolved/voluntaril ed liability company	,5	

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