L16000195859

(Re	questor's Name)	,
(Ad-	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	∋ #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

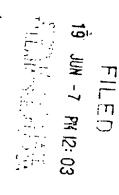
Office Use Only



200328404392

05/03/19--01032--015 **20.00

08/10/19



1

JUN 1 0 2019 S. YOUNG



May 16, 2019

UNITED STATES CORPORATION AGENTS, INC LEGALZOOM.COM, INC 9900 SPECTRUM DRIVE AUSTIN, TX 78717

SUBJECT: NARETEK, LLC Ref. Number: L16000195859

We have received your document for NARETEK, LLC and check(s) totaling \$20.00. However, the document has not been filed and is being returned for the following reason(s):

There is a balance due of \$5.00. Please return a copy of this letter to ensure your money is properly credited.

The fee to resign as registered agent of an inactive limited liability company is \$25.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young Regulatory Specialist II

Letter Number: 619A00009870

www.sunbiz.org

COVER LETTER

TO: Registration Section Division of Corporations		
·		
SUBJECT: NARETEK, LLC		
Name of Lim	ited Liability	Company
DOCUMENT NUMBER: L16000195859	·	
The enclosed Resignation of Registered Agent I for filing.	or a Limited	Liability Company and fee are submitted
Please return all correspondence concerning this	matter to th	e following:
United States Corporation Agents, Inc.		
Name of Person		
Legalzoom.com, Inc.		
Name of Firm/Company		
9900 Spectrum Dr.		
Address		
Austin, TX 78717		
City/State and Zip Code		
E-mail address: (to be used for future annual report)	notification)	
For further information concerning this matter, $\boldsymbol{\beta}$	dease call:	
Kasandra Lund	, 1 800	773-0888 x3951
Name of Person	Area Code	773-0888 x3951) Daytime Telephone Number
Enclosed is a check made payable to the Florida liability company or \$25.00 for an administrative liability company.	Department ely dissolved	of State for \$85.00 for an active limited I, voluntarily dissolved or withdrawn limited
MAILING ADDRESS:	STREE	T ADDRESS:
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	

Registration Section Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

INHS17 (2/14)

P.O. Box 6327

Tallahassee, FL 32314

1. No. 1. 12

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115. Florida Statutes, the v	undersigned.
United States Corporation Agents, Inc.	, hereby resigns as
Name of Registered Agent	
Registered Agent for NARETEK, LLC	
Name of Limited Liability Company	·
L16000195859	
Document Number, il'known	
A copy of this resignation was mailed to the above listed limited liabi	ility 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.
Aig Anthre of Resigning Ag	JUN 7
If signing on behalf of an entity:	
Cheyenne Moseley	7. 7.
Lyped or Printed Name	
Asst. Secretary for United States Corporation	n Agents, Inc.

Capacity

\$85.00 Active limited liability company
\$25.00 Active limited liability company 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