## L17000 035 584

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## **COVER LETTER**

Garrison Marine Consulting 1	
SUBJECT: Garrison Marine Consulting, L	imited Liability Company
DOCUMENT NUMBER: L17000035584	
The enclosed Resignation of Registered Agen for filing.	t for a Limited Liability Company and fee are submitted
Please return all correspondence concerning the	nis matter to the following:
United States Corporation Agents, Inc.	
Name of Person	<del></del>
Legalzoom.com, Inc.	
Name of Firm/Company	
9900 Spectrum Dr.	
Address	<del></del>
Austin, TX 78717	
City/State and Zip Code	
E-mail address: (to be used for future annual repo	rt notification)
For further information concerning this matter	. please call:
Janna Pantoja	at ( 1 800 ) 773-0888 x3950   Area Code   Daytime Telephone Number
Name of Person	Area Code Daytime Telephone Number
Enclosed is a check made payable to the Florid liability company or \$25.00 for an administrat liability company.	da Department of State for \$85.00 for an active limited ively dissolved, voluntarily dissolved or withdrawn limited
MAILING ADDRESS:	STREET ADDRESS:

Registration Section
Division of Corporations

Tallahassee, FL 32301

Clifton Building
2661 Executive Center Circle

INHS17 (2/14)

Registration Section Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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TO:

Registration Section Division of Corporations

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

Pursuant to the provis	sions of section 605.0115. Florida Statutes, the uno	dersigned.	
United States Corporation Agents, Inc.		_ , hereby resigns as	
	Name of Registered Agent	_ ; , , e, e b y , e b , E , b , u b	
Registered Agent for	Garrison Marine Consulting, LLC		
	Name of Limited Liability Company		<del>.</del>
L17000035584			
Document	Number, if known		
A copy of this resigna	ation was mailed to the above listed limited liabilit	y company at its last known ad	dress.
The agency is termina	sted and the office discontinued on the 31st day af		
If signing on behalf of	f an entity:	TAL	919,
	Cheyenne Moseley	L AF	61 Inf 6102
	Typed or Printed Name	——————————————————————————————————————	9
	Asst. Secretary for United States Corporation A	Agents, Inc.	n i
	Capacity	77. 77.	9:59

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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, F1, 32314