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(City/State/Zip/Phone #)	05/02/1901007005 ** 822.50
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	19 MAY OF MILE
Special Instructions to Filing Officer: Office Use Only	PILED 2019 MAY - 2 A 2: 17 MILLAHASSEELFLORIDA
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FLORIDA DEPARTMENT OF STATE Division of Corporations 5, INC. K STOP LLC 18330

May 3, 2019

CORPORATE ACCESS, INC.

SUBJECT: VIKA TRUCK STOP LLC Ref. Number: L17000048330

We have received your document for VIKA TRUCK STOP LLC and your check(s) totaling \$622.50. However, the enclosed document has not been filed and is, being returned for the following correction(s):

The form you submitted is for a CORP, but your entity is a LLC. Please complete and return the enclosed blank form(s).

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) 245-6051.

Dionne M Scott Regulatory Specialist II

Letter Number: 719A00008900

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	INC. P.O. Box	236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666				
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	(CORPORATE NAME AND	DOCUMENT #)				

COVER LETTER

TO: Registration Section Division of Corporations

VIKA TRUCK STOP LLC

SUBJECT:

Name of Limited Liability Company

DOCUMENT NUMBER: L17000048330

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:

SHARON ROZENCWAIG

ROZENCWAIG & NADEL, LLP

Name of Firm/Company

Name of Person

301 W HALLANDALE BEACH BLVD

Address

HALLANDALE BEACH, FL 33009

City/State and Zip Code

ENTITIES@RNFLAW.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SHARON ROZENCWAIG	,954	455-5100
	at ()
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisio	ns of section 605.0115, Florida Statutes, the unde	rsigned,
ROZENCWAIG & N	NADEL, LLP	, hereby resigns as
	Name of Registered Agent	
Registered Agent for $\underline{\vee}$	IKA TRUCK STOP LLC	
	Name of Limited Liability Company	,
L17000048330		
Document Nu	umber, if known	Ā. 23
A copy of this resignation	on was mailed to the above listed limited liability	company at its last known address.
The agency is terminate	d and the office discontinued on the 31st day after Jerlie Clair Signature of Resigning Agent	the date on which this statement is filed
lf signing on behalf of a	n entity:	L <
	LESLIE ALAN ROZENCWAIG	
	Typed or Printed Name REGISTERED AGENT	
	Capacity	
	FILING FEES:	

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