117000059734

(Requestor's Name)	
(Address)	
(Address)	_
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
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2021 DEC 20 AM 6: 20 SECRETARY OF STATE

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COVER LETTER

SUBJECT: USA Real Estate Homes I, LLC Name of Limited Liability Company DOCUMENT NUMBER: L17000059734 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: Brandy O'Dell Name of Person KKOS Lawvers Name of Firm/Company 1883 W Royal Hunte Dr. Ste 200 Address Cedar City, UT 84720 City/State and Zip Code brandy@kkoslawyers.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Brandy O'Dell Name of Person

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Registration Section Division of Corporations

TO:

Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provis	ions of section 605.0115, Florida Statutes, the unde	ersigned.	S	2021 DEC 20	
Registered Agent Solutions, Inc.		, hereby resigns as	E C	I DE	
	Name of Registered Agent	_ , 1101005 10515113 40		C 2	
Registered Agent for	USA Real Estate Homes I, LLC		言語	□	
			E Co	<u>.</u>	
	Name of Limited Liability Company		<u>- 111.55</u>	20	_,
L17000059734					
Document	Number, if known				
A copy of this resigna	tion was mailed to the above listed limited liability	company at its last	known a	ıddress	
The agency is termina	ted and the office discontinued on the 31st day after	er the date on which	this stat	ement	is filed.
	Jacqueline Thick! Signature of Resigning Agent				
If signing on behalf of	an entity:				
	Jacqueline Wright				
	Typed or Printed Name				
	VP Client Relations, Registered Agent Solutions, I	nc.			

Capacity

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