

6/13/2018

Division of Corporations

Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

LH00007660

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To: Division of Corporations
 Fax Number : (850)617-6383

From: Account Name : INCORPORATING SERVICES FL
 Account Number : I20050000052
 Phone : (850)656-7956
 Fax Number : (850)656-7953

2018 JUN 13 AM 8:01
 RECEIVED
 DEPARTMENT OF STATE
 DIVISION OF CORPORATIONS
 TALLAHASSEE, FL

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

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 DIVISION OF CORPORATIONS
 TALLAHASSEE, FL

**LLC REGISTERED AGENT RESIGNATION
 ANGELS WING OF FLORIDA LLC**

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$90.00

Electronic Filing Menu Corporate Filing Menu

JUN 13 2018
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ANGELS WING OF FLORIDA LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L17000076660

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:

Name of Person

INCORPORATING SERVICES, LTD.

Name of Firm/Company

3500 SOUTH DUPONT HIGHWAY

Address

DOVER, DE 19901

City/State and Zip Code

aarchambault@incserv.com

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

For further information concerning this matter, please call:

Amanda Archambault at (800) 346-4646
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 provisions of section 605.0115, Florida Statutes, the undersigned, INCORPORATING SERVICES, LTD., hereby resigns as
Name of Registered Agent

Registered Agent for ANGELS WING OF FLORIDA LLC

Name of Limited Liability Company

L17000076660

Document Number, if known

A copy of this resignation was mailed to the above listed limited liability 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.


Signature of Resigning Agent

If signing on behalf of an entity:

Amy Balke

Typed or Printed Name

ASSISTANT SECRETARY

Capacity

FILED
2018 JUN 13 AM 9:01
TALLAHASSEE FLORIDA

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, FL 32314