LI7 CCC 187316

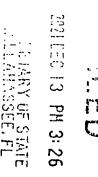
(Re	equestor's Name)		
(Ad	ldress)		
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(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Do	ocument Number)		
Certified Copies	_ Certificates	s of Status	
Special Instructions to Filing Officer:			

Office Use Only



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November 24, 2021

JPR ACCOUNTING 2751 ENTERPRISE RD STE 2098 ORANGE CITY, FL 32763

SUBJECT: STALLION TRAILERS, LLC

Ref. Number: L17000187316

We have received your document for STALLION TRAILERS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Document must be signed by resigning agent.

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.

Yasemin Y Sulker Regulatory Specialist III

www.sunbiz.org

Letter Number: 721A00028554

COVER LETTER

Division of Corporations
SUBJECT: Stallon Trailers, LLC Name of Limited Liability Company
DOCUMENT NUMBER: L17000187316
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:
Mariceli Segaria Name of Person
JPR Accounting Name of Firm/Company
2751 Enterprise Rd. STE. 209B Address
Olange City, FL 32763 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Mariceli Segaria at (386) 216 - 4936 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

TO:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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 provision	s of section 605.0115, Florida Statutes, the undersigned,	
Marice	I Segara (JPR ACCOUNTING, hereby resigns	c ne
	Name of Registered Agent	a tto
Registered Agent for	Stanion Trailers, LLC	
	Name of Limited Liability Company	·
L1700018731	16	
Document Nur	mber, if known	
	n was mailed to the above listed limited liability company at its land the office discontinued on the 31st day after the date on wh	
The agency is terminated	and the office discontinued on the 31st day after the date on wh	iich this statement is filed.
		44.531
	Signature of Resigning Agent	
If signing on behalf of an	entity:	13 PH 3: 26 MRY OF STATI
	Typed or Printed Name	ATE ATE
	Capacity	
	Спристу	

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