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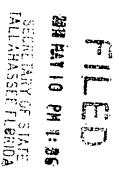
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J. HARRIS

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Runyon'S All in One U.C. Name of Limited Liability Company
DOCUMENT NUMBER: <u>L 17000203267</u>
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:
George Michael Zlokas Name of Person
Name of Firm/Company
2805 North "R" Street
Pensacda, Florida 32505 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
George Zlo Kos at (850) 316.7271 or (850) 497.4879 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	s of section 605.0115, Florida	Statutes, the undersigned	∌d,			
George Mic	chael ZloKas Name of Registered Agent	, here	eby resigns as			
Registered Agent for	Runyon's All	In One L	LC.			
	Name of Limited Liabili	ty Company				_•
LI70002C Document Num	3267 nber, if known					
A copy of this resignation	n was mailed to the above liste	ed limited liability comp	any at its last l	known a	ddress	8.
The agency is terminated	and the office discontinued of	n the 31st day after the o	date on which	this state	ment	is filed
	Doorge Mich	had Alokas	l	****		
	O Signature	or Resigning Agent		ALC ALC	2	emeliese
If signing on behalf of an	entity:			至於	H	executes.
Typed or Pris		nted Name		SSEE FI	Må O	
	Capacity	y		POINTE	69	A
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FILING FEES: \$ 85.00 Active \$ 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