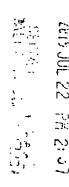
# L17000 207 177

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### **COVER LETTER**

SUBJECT: VEHICLES MIAMI LLC Name of Limited Liability Company DOCUMENT NUMBER: L17000207177 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: United States Corporation Agents, Inc. Name of Person Legalzoom.com, Inc. Name of Firm/Company 101 North Brand Blvd. 11th Floor Address Glendale, CA 91203 City/State and Zip Code raresignations@legalzoom.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ) 773-0888 x3951 Kasandra Lund Area Code Davtime Telephone Number 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn

## MAILING ADDRESS:

limited liability company.

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

TO:

Registration Section Division of Corporations

# STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provis	ions of section 605.0115, Florida Statutes, the unde	rsigned.
United States Cor	, hereby resigns as	
	Name of Registered Agent	
Registered Agent for_	VEHICLES MIAMI LLC	
<u> </u>	Name of Limited Liability Company	
L17000207177		رتم وين التي ريان
Document l	Number, if known	
The agency is terminat  If signing on behalf o	ed and the office discontinued on the 31st day after the Signature of Resigning Agent f an entity:	ne date on which this statement is file
	Cheyenne Moseley	
	Typed or Printed Name	
	Asst. Secretary for United States Corporation Age	nts, Inc.
	Capacity	
	FILING FEES: \$ 85.00 Active limited liability cor \$ 25.00 Administratively dissol	ved/ voluntarily dissolved/

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

withdrawn limited liability company