L17000256072

(Re	questor's Name)			
(Ad	dress)			
,	,			
(Address)				
(Cit	y/State/Zip/Phone	e #)		
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Resign

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Triple W Enterprises, LLC	
Name of Limited Liabi	ity Company
DOCUMENT NUMBER: L17000256072	
The enclosed Resignation of Registered Agent for a Limi for filing.	ted Liability Company and fee are submitted
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	:
Janna Pantoja 800	773-0888 x3950
Name of Person Area Coc	le 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited the state of the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company or \$25.00 for an administratively dissolved. 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

INHS17 (2/14)

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ons of section 605.0115	, Florida Statutes, the unders	gned,	
United States Corporation Agents, Inc.			hereby resigns as	
Name of Registered Agent		t	_ , hereby resigns as	
Registered Agent for	riple W Enterprise	s, LLC		
	Name of Limi	ted Liability Company	,	
L17000256072				
Document N	umber, if known			
A copy of this resignati	on was mailed to the al	ove listed limited liability co	mpany at its last known address.	
		Signature of Resigning Agent		
If signing on behalf of a	in entity:		2020	
	Cheyenne Moseley		2020 JUN 17	
Typed or Printed Name				
	Asst. Secretary for United States Corporation Agents, Inc.		s, Inc.	
		Capacity		
			 ල	
	FILING F \$ 85.00 \$ 25.00	EES: Active limited liability compacts Administratively dissolved/withdrawn limited liability	oany voluntarily dissolved/ company	

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