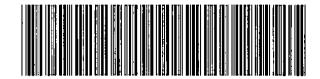
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| (Requestor's Name) |
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| (Address) |
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| (City/State/Zip/Phone #) |
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| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
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| Certified Copies Certificates of Status |
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| Charlet Instructions to Filing Officer |
| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

| MTW Auto Consulting, LLC | | | |
|---|----------------------------------|--|--|
| SUBJECT: MTW Auto Consulting, LLC Name of Lin | mited Liability | Company | |
| DOCUMENT NUMBER: L18000005642 | | | |
| The enclosed Resignation of Registered Agent for filing. | for a Limited | Liability Company and fee are submitted | |
| Please return all correspondence concerning th | is matter to th | e following: | |
| United States Corporation Agents, Inc. | | | |
| Name of Person | | | |
| Legalzoom.com, Inc. | | | |
| Name of Firm/Company | | | |
| 9900 Spectrum Dr. | | | |
| Address | | | |
| Austin, TX 78717 | | | |
| City/State and Zip Code | | | |
| | | | |
| E-mail address: (to be used for future annual repor | rt notification) | | |
| For further information concerning this matter | . please call: | | |
| Janna Pantoja | 1 800 | 773-0888 x3950 Daytime Telephone Number | |
| Name of Person | Area Code | Daytime Telephone Number | |
| Enclosed is a check made payable to the Floric liability company or \$25.00 for an administrationability company. | la Department ively dissolved | of State for \$85.00 for an active limited d, voluntarily dissolved or withdrawn limited | |
| MAILING ADDRESS: | STREE | TT ADDRESS: | |
| Registration Section | Registration Section | | |
| Division of Corporations | | n of Corporations | |
| P.O. Box 6327 Tallahassee, FL 32314 | | Building xecutive Center Circle | |
| rananassee, r.L. 52544 | 2001 L. | recurry Center Citere | |

Tallahassee, FL 32301

18HS17 (2/14)

TO: Registration Section Division of Corporations

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

| Pursuant to the provisio | ns of section 605.0115, Florida Statutes, the | e undersigned. | |
|----------------------------|--|---|---------------|
| United States Corp | oration Agents, Inc. | , hereby resigns us | |
| | Name of Registered Agent | , , , , , , , , , , , , , , , , , | |
| Registered Agent for M | ITW Auto Consulting, LLC | | |
| | Name of Limited Liability Company | | • |
| L18000005642 | | | |
| Document Nu | imber, if known | | |
| A copy of this resignation | on was mailed to the above listed limited lia | ibility company at its last known add | ress. |
| The agency is terminate | d and the office discontinued on the 31st da | y after the date on which this statem | ent is filed. |
| | Signature of Resigning- | Agent | |
| If signing on behalf of a | n entity: | SEC TA | 2019 JUL 22 |
| | Cheyenne Moseley | | <u> </u> |
| | Typed or Printed Name | ion Agents. Inc. | V |
| | Asst. Secretary for United States Corporat | ion Agents. Inc. | |
| | Capacity | <u>., 1</u> | M 2: 22 |
| | FILING FEES: \$ 85.00 Active fimited liabi \$ 25.00 Administratively di withdrawn limited | ility company issolved/ voluntarily dissolved/ | • |

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