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2019 JUN 21 PM 4: 45

C. GOLDEN

JUL - 2 2019

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Richard Geddes LLC	
Name of Limited Lie	ability Company
DOCUMENT NUMBER: L18000047595	
The enclosed Resignation of Registered Agent for a Li for filing.	mited Liability Company and fee are submitted
Please return all correspondence concerning this matte	r to the 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 report notificat	ion)
For further information concerning this matter, please of	call:
Janna Pantoja 1 800	773-0888 x3950 Code Daytime Telephone Number
Name of Person Area	Code Daytime Telephone Number
Enclosed is a check made payable to the Florida Depar liability company or \$25.00 for an administratively distributive company.	tment of State for \$85.00 for an active limited solved, voluntarily dissolved or withdrawn limited

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	ons of section 605.0115, Florida Statutes, the unders	ligned.			
United States Corporation Agents, Inc		hereby resigns as			
		ercoy resigns as			
Registered Agent for	Richard Geddes LLC				
	Name of Limited Liability Company		-		
L18000047595					
Document No	umber, if known				
A copy of this resignation	on was mailed to the above listed limited liability co	ompany at its last kn	iown ad	ldress.	
The agency is terminate	ed and the office discontinued on the 31st day after to signature of Resigning Agent	he date on which th	is stater	ment is	filed.
If signing on behalf of a	in entity:			20	
	Cheyenne Moseley		:	2019 JUN 21	-7.5
	Typed or Printed Name		-	E	ر سة. } آر
	Asst. Secretary for United States Corporation Ager	nts, Inc.	~ ·.	12	,===
	Capacity			PH 4: 45	
	FILING FEES:			CI	
	\$ 85.00 Active limited liability con \$ 25.00 Administratively dissolved withdrawn limited liability	// voluntarily dissolv	ved/		

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