L18000 051 952

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

Office Use Only



400331995854

SECRITION OF STATE

JUL 2 6 2019

COVER LETTER

| SUBJECT: CAPSTONE LANDS | Name of Limited Liability Company |
|--|--|
| DOCUMENT NUMBER: <u>L18000</u> | |
| The enclosed Resignation of Registe submitted for filing. | red Agent for a Limited Liability Company and fee are |
| Please return all correspondence con | cerning this matter to the following: |
| United States Corporation Agents | s, Inc. |
| Name of Person | 1 |
| Legalzoom.com, Inc. | |
| Name of Firm/Com | pany |
| 101 North Brand Blvd. 11th Floor | Γ |
| 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 t | his matter, please call: |
| Kasandra Lund | at (1 800) 773-0888 x3951 |
| Name of Person | Area Code Daytime Telephone Number |
| Enclosed is a check made payable to liability company or \$25.00 for an aclimited liability company. | the Florida Department of State for \$85.00 for an active limit dministratively dissolved, voluntarily dissolved or withdrawn |
| MAILING ADDRESS: | STREET ADDRESS: |
| Registration Section | Registration Section Division of Corporations |
| Division of Corporations P.O. Box 6327 | Clifton Building |

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

TO: Registration Section Division of Corporations

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

| Pursuant to the provisi | ons of section 605.0115, Florida Statutes, the undersig | ned. |
|-------------------------|--|----------------------------|
| United States Corp | , hereby resigns as | |
| | Name of Registered Agent | |
| Registered Agent for_ | CAPSTONE LANDSCAPE, LLC | |
| _ | Name of Limited Liability Company | . |
| L18000051952 | | |
| Document N | umber, if known | |
| | d and the office discontinued on the 31st day after the da Signature of Resigning Agent | |
| If signing on behalf of | an entity: | 201 |
| Cheyenne Moseley | | FIL 22 SEGINE AND TALL AND |
| | Typed or Printed Name | - L2 |
| | Asst. Secretary for United States Corporation Agents, | Inc. 22 T |
| | Capacity | PH 4: 14 SSEE, FL |

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

FILING FEES:
\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/

withdrawn limited liability company