# L18000 051 975

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### **COVER LETTER**

SUBJECT: EM & M PHONE REPAIR, LLC Name of Limited Liability Company	
DOCUMENT NUMBER: L18000051975	
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:	
·	
Kasandra Lund at (1800) 773-0888 x3951  Name of Person Area Code Daytime Telephone Number	
Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrimited liability company.	: lir raw

## 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

TO:

Registration Section
Division of Corporations

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

Pursuant to the provi:	sions of section 605.0115. Florida Statutes, the unde	ersigned.
United States Co	, hereby resigns as	
	Name of Registered Agent	
Registered Agent for	EM & M PHONE REPAIR, LLC	
<del> </del>	Name of Limited Liability Company	•
L18000051975		
Document	Number, if known	
A copy of this resigna	ation was mailed to the above listed limited liability	company at its last known address.
The agency is terminal	ted and the office discontinued on the 31st day after the Signature of Resigning Agent	ne date on which this statement is filed.
If signing on behalf o	of an entity:	
	Cheyenne Moseley	
	Typed or Printed Name	2011 SE(
	Asst. Secretary for United States Corporation Age	ents, Inc.
	Capacity FILING FEES:	SECRETATION OF SECRETARIAS SEE, F

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withdrawn limited liability company