L18000174105

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	= #)
,		,
PICK-UP	☐ WAIT	MAIL
_	_	
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Eiling Officer	<u>_</u>
Special instructions to	Filling Officer.	
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Office Use Only



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NOV 03 2020 S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations

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SUBJECT: SOUTHERN MOBILE RV MAINTENANG	JE LLC
Name of Limited Liabi	lity Company
DOCUMENT NUMBER: L18000174105	
The enclosed Resignation of Registered Agent for a Limfor filing.	ited Liability Company and fee are submitted
Please return all correspondence concerning this matter to	o the following:
United States Corporation Agents, Inc.	
Name of Person	
LegalZoom.com, Inc.	
Name of Firm/Company	
101 North Brand Blvd, 11th Floor	
Address	<u> </u>
Glendale, CA 91203	
City/State and Zip Code	
raresignations@legalzoom.com	
E-mail address: (to be used for future annual report notification	<u>i)</u>
For further information concerning this matter, please ca	II:
Joyce Yi 800	773-0888 x7789
Name of Person Area Co	773-0888 x7789) ide 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisio	ns of section 605.0115	5. Florida Statutes, the under	rsigned.			
United States Corporation Agents, Inc.		, hereby resigns as				
Name of Registered Agent						
Registered Agent for S	OUTHERN MOBI	LE RV MAINTENANCE	ELLC			_
	Name of Lim	ited Liability Company			-	٠٠
L18000174105						
Document No	imber, if known					
A copy of this resignation	on was mailed to the a	bove listed limited liability	company at its las	st known	address	
The agency is terminate	d and the office discor	ntinued on the 31st day after	the date on whic	h this sta	tement	is tiled.
		Signature of Resigning Agent				
If signing on behalf of a	n entity:				2007	
Cheyenne Moseley			• •	13 6		
	T	oped or Printed Name			SEP :	252
	Asst. Secretary for U	nited States Corporation Ag	ents, Inc.	경기 기업::	28	1
		Capacity			PM 1:	
	FILING	FEES:			: 52	
	\$ 85.00 \$ 25.00	Active limited liability or Administratively dissolve withdrawn limited liabili	ed/ voluntarily dis	ssolved/		

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