Division of Corporations Electronic Filing Cover Sheet

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.To:

Division of Corporations

Fax Number : (850)617-6363

From:

Account Name : INCORP SERVICES INC

Account Number : I2C120C00007

: (702)866-2500

Fax Number

: (702)900-2290

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address: documents@incorp.com

LLC REGISTERED AGENT RESIGNATION **EUROGLASS LLC**

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Corporate Filing Menu

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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: EUROGLASS LLC Name of Limited Liability Company	
DOCUMENT NUMBER: L18000177541	
The enclosed Resignation of Registered Agent for a Limited Liability Company and for filing.	ee are submitted
Please return all correspondence concerning this matter to the following:	
Wendy Hefley	
Name of Person	
Incorp Services, Inc.	
Name of Firm/Company	
3773 Howard Hughes Parkway, Suite 500S	
Address	
Las Vegas, NV 89169-6014	
City/State and Zip Code	
processing@incorp.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Name of Person Name of Person	
Name of Person Area Code Daytime Telephone Num	per
Enclosed is a check made navable to the Florida Department of State for \$85.00 for a	n active limited

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Incorp Services, In		beschures, the undersigned,	uno ao		
Name of Registered Agent		, hereby resig	ns as		
Registered Agent for E	UROGLASS LLC				
		ited Liability Company			
L18000177541					
Document Nu	mber, if known				
A copy of this resignation	on was mailed to the a	bove listed limited liability company at it	s last known addr	æ55.	
The agency is terminate	n entity:	Signature of Resigning Agent	which this stateme	≥nt is filed.	
		r Incorp Services, Inc.			
	Authorized Repr	· •			
	, tationized repr	Capacity			
	FILING \$ 85.00 \$ 25.00	FEES: Active limited liability company Administratively dissolved/voluntaril withdrawn limited liability company	y dissolved/.	2021 NOV -2 P	
	Make checks payab	le to Florida Department of State and mail Division of Corporations	l to:	I	
		P.O. Box 6327	927	<u>က</u> သ	
		Tallahossee F1, 37314	Car ; .	\ C	