# L18000184631

(Requ	uestor's Name)	
(Addr	ess)	
(Addr	ess)	
(City/	State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Busi	ness Entity Nan	ne)
(Docu	ıment Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer:	
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Office Use Only



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#### **COVER LETTER**

SUBJECT: Firehawk Enterprises LLC Name of Limited Liability	y Company
DOCUMENT NUMBER: L18000184631	
The enclosed Resignation of Registered Agent for a Limite for filing.	d Liability Company and fee are submitted
Please return all correspondence concerning this matter to	the following:
United States Corporation Agents, Inc.	
Name of Person	<del>-</del>
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:	
at (	773-0888  Daytime Telephone Number
Name of Person Area Code	Daytime Telephone Number

## 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

INHS17 (2/14)

TO:

Registration Section Division of Corporations

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

Pursuant to the provision	ns of section 605.011	5. Florida Statutes, the under	signed,	
United States Corporation Agents, Inc.		nc.	, hereby resigns as	
	Name of Registered Age	nt	Hereby resigns us	
Registered Agent for Fi	rehawk Enterpris	es LLC		<del></del>
	Name of Lin	nited Liability Company		·
L18000184631				
Document Nu	imber, if known			
A copy of this resignation	on was mailed to the	above listed limited liability o	rompany at its last known add	dress.
The agency is terminated	d and the office disco	ontinued on the 31st day after	the date on which this states	nent is filed
	(	Signature of Resigning Agent	<del></del>	
If signing on behalf of a	n entity:			
	Cheyenne Mose	eley		
	•	Typed or Printed Name		,
	Asst. Secretary for I	United States Corporation Age	ants, Inc.	. 39
		Capacity	<del></del>	7
				.7 <del></del>
				ت. <del>حم</del>
	<u>FILING</u> \$ 85.00 \$ 25.00	FEES: Active limited liability co Administratively dissolve withdrawn limited liabilit	d/voluntarily dissolved/	5 20 Dec 19 PH 6: 00

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