

L18000207652

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

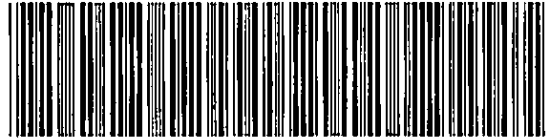
(Document Number)

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JUN 23 2020

I ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Knights Auto A22 LLC
Name of Limited Liability Company

DOCUMENT NUMBER: C 18000 207652

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:

Angela C. CRASERO
Name of Person

Knights Auto A22 LLC
Name of Firm/Company

19821 NW 7AVE #205
Address

Miami, FL 33179
City/State and Zip Code

ZIANS.21@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Zachary LANS at (305) 619-6145-954-652
Name of Person Area Code Daytime Telephone Number 8041

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



2020 JUN 22 PM 1:33

FLORIDA DEPARTMENT OF STATE
- Division of Corporations

May 19, 2020

ZACHARY LANS
19821 NW 2 AVE #205
MIAMI, FL 33179

SUBJECT: KNIGHTS AUTO A2Z LLC
Ref. Number: L18000207652

We have received your document for KNIGHTS AUTO A2Z LLC and your check(s) totaling \$140.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Limited Partnership, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 320A00010077

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

Angela C. CASERO, hereby resigns as
Name of Registered Agent

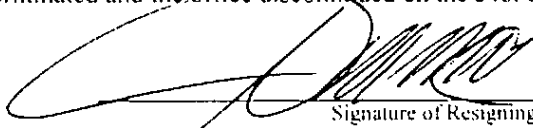
Registered Agent for KNIGHTS Auto A-2 LLC

Name of Limited Liability Company

L1800207652
Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.


Signature of Resigning Agent

305/244-0272

If signing on behalf of an entity:

Typed or Printed Name

Capacity

FILING FEES:

\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company

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

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