## 118000237819

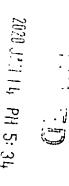
(Re	questor's Name)	
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C. GOLDEN FEB 1 2 2020

## **COVER LETTER**

SUBJECT: QUICKNEEDS LLC  Name of Lin	mited Liability Company
DOCUMENT NUMBER: L18000237819	
The enclosed Resignation of Registered Agent submitted for filing.	for a Limited Liability Company and fee are
Please return all correspondence concerning th	is 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 repo	rt notification)
For further information concerning this matter	, please call:
Kasandra Lund 8 Name of Person	at ( 1 800 ) 773-0888 x 3951 Area Code Daytime Telephone Number
Enclosed is a check made payable to the Floric liability company or \$25.00 for an administrat limited liability company.	da Department of State for \$85.00 for an active limited ively dissolved, voluntarily dissolved or withdrawn
MAILING ADDRESS:	STREET ADDRESS:

Registration Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Registration Section Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

**TO:** Registration Section Division of Corporations

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

Pursuant to the provis	ions of section 605.0115. Florida Statutes, the unders	signed.
United States Corporation Agents, Inc.		, hereby resigns as
	Name of Registered Agent	
Registered Agent for_	QUICKNEEDS LLC	<del></del>
	Name of Limited Liability Company	
L18000237819	n	
Document 1	Number, if known	
	tion was mailed to the above listed limited liability of and the office discontinued on the 31st day after the	
	Signature of Resigning Agent	7020 J? 1 1 1
If signing on behalf of an entity:		·~;
Cheyenne Moseley		<u></u>
	Typed or Printed Name	<del></del>
	Asst. Secretary for United States Corporation Agent	s, Inc.
	Capacity	s. Inc. Signal Signal S

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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