L180000243898

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Account#: 120000000088

Date:	09/17/2019	
	Joy Weaver	-
Reference	#:1130463	_
Entity Nan	ne:BUNKER I	ELECTRIC, LLC
	cles of Incorporation/Authorization	
☐ Am	endment	
☐ Cha	ange of Agent	
☐ Rei	nstatement	
Coi	nversion	
□ Ме	rger	
☐ Dis	solution/Withdrawal	
☐ Fic	titious Name	
✓ Oth	erCANCELLATIO	N OF REGISTERED AGENT
Authorized	d Amount: \$85.00	
Signature	- Ju	

COVER LETTER

SUBJECT: Name of Limited Liability	Company
DOCUMENT NUMBER: L18000243898	
The enclosed Resignation of Registered Agent for a Limited for filing.	Liability Company and fee are submitted
Please return all correspondence concerning this matter to the	ne following:
JOSEPH M. HERNANDEZ, ESQ.	
Name of Person	
WEISS SEROTA HELFMAN COLE & BIERMAN, P.L.	
Name of Firm/Company	
2525 PONCE DE LEON BOULEVARD, SUITE 700	
Address	
CORAL GABLES, FLORIDA 33134	
City/State and Zip Code	
JHERNANDEZ@WSH-LAW.COM	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
JOSEPH M. HERNANDEZ 305	854-0800
Name of Person Area Code	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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited

MAILING ADDRESS:

liability company.

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

WEICE CEDOTAL	ons of section 605.0115, Florida Statutes, the u	ndersigned,	
WEISS SERUTA F	HELFMAN COLE & BIERMAN, P.L.	, hereby resigns as	
	Name of Registered Agent	Chereby resigns as	
Registered Agent for $\frac{B}{}$	BUNKER ELECTRIC, LLC		
	Name of Limited Liability Company		
L18000243898			
Document N	umber, if known		
A copy of this resignati	on was mailed to the above listed limited liabil	ity company at its last known address.	
The agency is terminate	ed and the office discontinued on the 31st day of	after the date on which this statement is fil	led.
The agency is terminate	ed and the office discontinued on the 31st day a		led.

FILING FEES:

\$ 85.00 | Active limited liability company | 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