# L19000005486

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#### **COVER LETTER**

Name	of Limited Liability Company
DOCUMENT NUMBER: <u>L19000005</u>	486
The enclosed Resignation of Registered Aubmitted for filing.	Agent for a Limited Liability Company and fee are
Please return all correspondence concern	ing this matter to the following:
United States Corporation Agents, In	C.
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 annua	l report notification)
For further information concerning this n	•
Kasandra Lund	at ( 1 800 ) 773-0888 x3951
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

**TO:** Registration Section Division of Corporations

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

Pursuant to the provisi	ions of section 605.0115, Florida Statutes, the undersign	ed,	
United States Corporation Agents, Inc.		. hereby resigns as	
	Name of Registered Agent		
Registered Agent for_	ON NARROW ROAD L.L.C.		
	Name of Limited Liability Company		
ON NARROW ROA	AD L.L.C.		
Document 8	Sumber, if known		
A copy of this resignar	tion was mailed to the above listed limited liability comp	pany at its last known address.	
The agency is terminate	ed and the office discontinued on the 31st day after the date	on which this statement is filed.	
	Signature of Resigning Agent	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	
If signing on behalf of	an entity:		
Cheyenne Moseley			
	Typed or Printed Name		
	Asst. Secretary for United States Corporation Agents, In	C.	
	Capacity	- <del>-</del>	

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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