# L19000061721

(Requestor's Name)
(Nequestor 9 Name)
(Address)
(Address)
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(City/State/Zip/Phone #)
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

### **COVER LETTER**

Division of Corporations	
Jerger Enterprises LLC SUBJECT:	
Name of Limited Liability	Company
DOCUMENT NUMBER: L19000061721	
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 th	e following:
Mariette Toribio	
Name of Person	
Brick Business Law, P.A.	
Name of Firm/Company	
3413 W Fletcher Ave	
Address	
Tampa, FL 33618	
City/State and Zip Code	
Only to be used for this action: mariette.toribio@brickbusinesslaw.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Mariette Toribio 813 at (	544-2041
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

#### **Mailing Address:**

Registration Section

TO:

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

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

Pursuant to the provis	ions of section 605.011	5, Florida Statutes, the undersigned,	
Brick Business Law, P.	Α.	, hereby i	resigns as
	Name of Registered Age		
Registered Agent for	Jerger Enterprises LLC		
	Name of Lin	nited Liability Company	
_19000061721			
Document	Number, if known	<del></del>	
A copy of this resigna	tion was mailed to the a	above listed limited liability company	at its last known address.
The agency is termina	ted and the office disco	ontinued on the 31st day after the date of	on which this statement is filed.
	Keiser	_	
		Signature of Resigning Agent	-
If signing on behalf of	an entity:		<b>C</b> 9
	Kevin G Brick		1024 .
	President	Typed or Printed Name	FIL 2024 JUL - I TÄLLÄHÄSS
		Capacity	
	FILING \$ 85.00 \$ 25.00	FEES: Active limited liability company Administratively dissolved/volunt	PH 4: 03 EFFLORIDA

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