L19000062947

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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SECRETARY OF STATE

COVER LETTER

TO: Registration Section	•
Division of Corporations	•
SUBJECT: WHEELHOUSE WELDING LLC	•
Name of Limited Liability	Company
DOCUMENT NUMBER: L19000062947	
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	e following:
United States Corporation Agents, Inc.	
Name of Person	
Legalzoom.com, Inc.	
Name of Firm/Company	
9900 Spectrum Dr.	
Address	
Austin, TX 78717	
City/State and Zip Code	
raresignations@legalzoom.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Name of Person at (800 Area Code	773-0888 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 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

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ns of section 605.0115, Florida Statutes, the unders	igned.	200 S 74T
United States Corp	oration Agents, Inc.	hereby resigns as	FIL 2022 APR 13 SECRETARY TALLAHASSI
	Name of Registered Agent		E R
Registered Agent for W	HEELHOUSE WELDING LLC		- 1 · · · · · · · · · · · · · · · · · ·
			PH.
	Name of Limited Liability Company		
L19000062947			
Document Nu	imber, if known		
A copy of this resignation	on was mailed to the above listed limited liability c	ompany at its last kn	nown address.
The agency is terminate	d and the office discontinued on the 31st day after Signature of Resigning Agent	the date on which th	is statement is filed.
If signing on behalf of a	n entity:		
	Cheyenne Moseley		
	Typed or Printed Name		
	Asst. Secretary for United States Corporation Age	nts, Inc.	
	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\$25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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