# L19000214698

(Requestor's Name)					
(Address)					
(Address)					
,					
(City/State/Zip/Phone #)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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TALLAHASSEE, FLORIDA

SEP - 1 2022 S. PRATHEF

### **COVER LETTER**

10:	Division of Corporations	
SUBJ	JECT: Gold Star Headlight Restoration LLC  Name of Limited Liability C	ompany
DOC	UMENT NUMBER: L19000214698	
The er for fili	nclosed Resignation of Registered Agent for a Limited Ling.	iability Company and fee are submitted
Please	e return all correspondence concerning this matter to the	following:
Unite	ed States Corporation Agents, Inc.	
	Name of Person	
Legal	Izoom.com, Inc.	
	Name of Firm/Company	
9900	Spectrum Dr.	
	Address	
Austir	n, TX 78717	
	City/State and Zip Code	
raresi	ignations@legalzoom.com	
E-	-mail address: (to be used for future annual report notification)	
For fur	rther information concerning this matter, please call:	
		73-0888
	Name of Person at () Area Code E	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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 provisio	ns of section 605.011	5. Florida Statutes, the unde	rsigned,		
United States Corporation Agents, Inc. hereby resigns as					
Name of Registered Agent					
Registered Agent for	old Star Headligh	t Restoration LLC			
	Name of Lin	ited Liability Company			
L19000214698					
Document No	ımber, if known	<del></del>			
A copy of this resignation	on was mailed to the a	above listed limited liability	company at its last knowr	n address.	
The agency is terminate	d and the office disco	ntinued on the 31st day after	the date on which this st	atement is filed.	
		Signature of Resigning Agent			
lf signing on behalf of a	n entity:	organism of reasoning rigen			
	Cheyenne Mose	ley			
	T	yped or Printed Name	<del></del> _		
	Asst. Secretary for U	Inited States Corporation Ag	ents, Inc.	7 <u>7.</u> 21	
		Capacity		122 11.5	
				影り	1.
				2022 JUN 14 SELAHASSEI	1=:
	<b>FILING</b> \$ 85.00 \$ 25.00	FEES: Active limited liability co Administratively dissolve withdrawn limited liabili	mpany d/ voluntarily dissolved/ ty company	, т. с.	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;

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