# L190000224194

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DESTREY BY AN OF STATE

#### **COVER LETTER**

UBJECT: Name of Limited Liability Company	
OCUMENT NUMBER:	
he enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitte or filing.	d
lease return all correspondence concerning this matter to the following:	
Thelsea Chapman	
Name of Person	
egaline Corporate Services, INC.	
Name of Firm/Company	
0601 Clarence Dr Ste 250	
Address	
risco, TX 75033-3867	
City/State and Zip Code	
@legatinc.com	
E-mail address: (to be used for future annual report notification)	
or further information concerning this matter, please call:	
helsea Chapman 844 386-0178 at ( )	
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations

TO:

### 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 provisio	ns of section 605.0115. Flori	da Statutes, the under	signed.	
Legaline Corporate Services, INC.			, hereby resigns as	
	, notes, resigns to			
Registered Agent for K	LING HOLDINGS LLC		<del></del>	<del></del>
	Name of Limited Lia	bility Company		·
L 19000226194 Document No	umber, if known			
A copy of this resignation	on was mailed to the above li	sted limited liability c	ompany at its last known add	łress.
The agency is terminate	d and the office discontinued	on the 31st day after	the date on which this statem	ent is filed.
	Signatu	Mallaux ure of Resigning Agent	<u></u>	702
If signing on behalf of a	in entity:			11 A. 17207
	Zachary	Mathewson	25	
	Typed or I	Printed Name	AS:	_ [[
	On Behaff of Legaline Corpo	rate Services, INC.	en en en	
	Сара	city	STATE E. FL	AH 8: 04

FILING FEES:

S \$5.00 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Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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