L19000271331

| (Requestor's Name) | | |
|---|------|--|
| (Address) | | |
| (Address) | | |
| (City/State/Zip/Phone #) | | |
| PICK-UP WAIT | MAIL | |
| (Business Entity Name) | | |
| (Document Number) | | |
| Certified Copies Certificates of St | atus | |
| Special Instructions to Filing Officer: | | |
| | | |
| | | |
| | | |

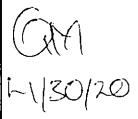
Office Use Only



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COVER LETTER

| TO: Registration Section Division of Corporations | | |
|--|--------------------------------|---|
| Osborn Tree Trimming LLC SUBJECT: | | |
| Name of Limi | ted Liability | Company |
| DOCUMENT NUMBER: L19000271331 | | |
| The enclosed Resignation of Registered Agent for filing. | or a Limited | Liability Company and fee are submitted |
| Please return all correspondence concerning this | matter to the | a following: |
| United States Corporation Agents, Inc. | | |
| 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 annual report) | notification) | |
| For further information concerning this matter, p | please call: | |
| Janna Pantoja | (| 773-0888 x3950 |
| Name of Person | Area Code | Daytime Telephone Number |
| Enclosed is a check made payable to the Florida liability company or \$25.00 for an administrativ liability company. | i Department rely dissolved | of State for \$85.00 for an active limited f, voluntarily dissolved or withdrawn limited |
| MAILING ADDRESS: | STREE | T ADDRESS: |
| Registration Section | Registration Section | |
| Division of Corporations | Division of Corporations | |
| P.O. Box 6327 | Clifton Building | |
| Hahassee, FL 32314 2661 Executive Center Circle | | geoutive Center Circle |

Tallahassee, FL 32301

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

| Pursuant to the provision | ons of section 605.0115, Florida Statutes, the unc | dersigned, |
|---------------------------|--|--|
| United States Corp | poration Agents, Inc. | _ , hereby resigns as |
| | Name of Registered Agent | |
| Registered Agent for _ | Osborn Tree Trimming LLC | |
| | Name of Limited Liability Company | · |
| L19000271331 | | |
| Document N | umber, if known | |
| A copy of this resignati | on was mailed to the above listed limited liabilit | y company at its last known address. |
| The agency is terminate | ed and the office discontinued on the 31st day af | ier the date on which this statement is filed. |
| | Signature of Resigning Agent | |
| If signing on behalf of: | an entity: | Agents Inc |
| | Cheyenne Moseley | A. P. |
| | Typed or Printed Name | |
| | Asst. Secretary for United States Corporation A | 1901(0) 1110: |
| | Capacity | P A STORY |
| | | 1:3 |
| | FILING FEES: | 9 ; |

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

\$ 85.00 \$ 25.00 Active limited liability company
Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company