## L19000288257

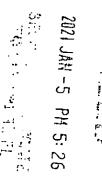
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Office Use Only



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## **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT: Zero Fuel LLC				
SUBJECT: Name of Lim	ited Liability	Company		
DOCUMENT NUMBER: L19000288257				
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 th	e 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:			
nt.	, 800	773-0888 ) Daytime Telephone Number		
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.	Department ely dissolved	of State for \$85.00 for an active limited d, voluntarily dissolved or withdrawn limited		
MAILING ADDRESS:		STREET ADDRESS:		
Registration Section Division of Corporations	Registration Section Division of Corporations			

Clifton Building 2661 Executive Center Circle

Tallahassee, Fl. 32301

P.O. Box 6327

Tallahassee, FL 32314

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

Pursuant to the provision	ons of section 605.0115, Florida Statutes, the und	lersigned.		1021 JAH -5	,
United States Corporation Agents, Inc.  Name of Registered Agent		, hereby resigns as	* - * *	Ail	
			٠	\forall \foral	
Registered Agent for Zero Fuel LLC			73.	PX	j i s grant
			14	ڼ	A.E.
	Name of Limited Liability Company			6	.•
L19000288257					
Document N	umber, if known				
_	on was mailed to the above listed limited liability and the office discontinued on the 31st day aff				
	Signature of Resigning Agent				
If signing on behalf of a	an entity:				
	Cheyenne Moseley				
	Typed or Printed Name				
	Asst. Secretary for United States Corporation A	Agents, Inc.			
	Capacity				

Make checks payable to Florida Department of State and mail to:

Active limited liability company
Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company

FILING FEES:

\$ 85.00 \$ 25.00

> Division of Corporations P.O. Box 6327 Tallahassee, FL 32314