# L19000295161

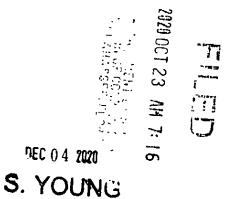
(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
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#### **COVER LETTER**

SUBJECT:  Name of Limited Liability	Company
DOCUMENT NUMBER: L19000295161	
The enclosed Resignation of Registered Agent for a Limited for filing.	I Liability Company and fee are submitted
Please return all correspondence concerning this matter to the	ne 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, please call:	
800 at (	773-0888
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

#### STREET ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

TO:

Registration Section Division of Corporations

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

Pursuant to the provision	is of section 605.0115. Florida Statutes, the undersi	gned,	
United States Corporation Agents, Inc. , hereby res		nereby resigns as	
Registered Agent for S	TEVEN VICK LANDSCAPING LLC		rear.
<del></del>	Name of Limited Liability Company		<del></del> '
L19000295161			
Document Nu	mber, if known		
	on was mailed to the above listed limited liability cold and the office discontinued on the 31st day after the Signature of Resigning Agent	he date on which this statement	
If signing on behalf of a	·	2328 OCT 23	
	Cheyenne Moseley	——	
	Typed or Printed Name Asst. Secretary for United States Corporation Ager	-167	1
	Capacity	7.16	لىيىدونى ا

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

Division of Corporations

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

P.O. Box 6327 Tallahassee, FL 32314