L20000016628

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

Office Use Only



200381083022

02/07/22--01027--007 **25.00

PILED 2022 FEB - 7 PM 3: 27 SECRETARY OF STATE

RAIPES

FEB 1 6 :02?

COVER LETTER

SUBJECT:_ Amy Antonioli BCBA LLC Name of Limited Liability Company DOCUMENT NUMBER: L20000016628 The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing. Please return all correspondence concerning this matter to the following: United States Corporation Agents, Inc. Name of Person Legalzoom.com, Inc. Name of Firm/Company 9900 Spectrum Dr. Address Austin, TX 78717 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: Name of Person

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

TO:

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 provisior	ns of section 605.011:	5, Florida Statutes, the unde	ersigned,			
United States Corporation Agents, Inc. Name of Registered Agent			, hereby resigns as			
Registered Agent for Ar	my Antonioli BCB	A LLC				
	Name of Lim	ited Liability Company			,	
L20000016628						
	imber, if known					
The agency is terminated	d and the office disco	ntinued on the 31st day after the signature of Resigning Agent	er the date on which		ent is f	īled.
If signing on behalf of an entity:				FE SE	2022 FEB	
	Cheyenne Moseley			三 芦荟	77	7
	Typed or Printed Name Asst. Secretary for United States Corporation Agents, Inc.			TARY AHAS	8-7	=
		Cupacity		OF STAT	PH 3: 2'	MO
	FILING \$ 85.00 \$ 25.00	FEES: Active limited liability of Administratively dissolved withdrawn limited liabi	company ved/ voluntarily diss dity company	r∺ solved/	7	

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

Tallahassee, FL 32314