L20000042197

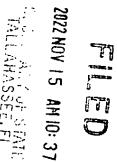
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: ALL AMAZON BIKE PARTS LLC				
Name of L	imited Liab	ility Company		
DOCUMENT NUMBER: L20000042197				
The enclosed Resignation of Registered Ager for filing.	nt for a Lim	nited Liability Company	and fee are submitted	
Please return all correspondence concerning t	this matter t	to the following:		
Chelsea Chapman				
Name of Person				
Legaline Corporate Services, INC.				
Name of Firm/Company			~	
10601 Clarence Dr Ste 250			2022 NOV 15	
Address			» Q	# # *****
Frisco, TX 75033-3867			ίο	= (=) - () - ()
City/State and Zip Code			ÖC 🕦	
ra@legalinc.com			AH IO: 37	_
E-mail address: (to be used for future annual repo	ort notificatio	n)		
For further information concerning this matte	r, please ca	H:		
Chelsea Chapman	844 at (386-0178		
Name of Person	Area Co	ode 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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
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 provisions of sec	ction 605.011	5, Florida Statutes, the und	ersigned,				
Legaline Corporate Services, INC			, hereby resigns as				
Name of	Registered Age	nt					
Registered Agent for ALL AMA	ZON BIKE P	ARTS LLC					
	Name of Lin	nited Liability Company					
L20000042197							
Document Number, if k	nown						
A copy of this resignation was n	nailed to the a	above listed limited liability	company at its las	t known addr	ess.		
The agency is terminated and the	e office disco	ntinued on the 31st day aft	er the date on which	h this stateme	nt is fil	led.	
	Mess	Signature of Resigning Agen	2112OUY				
If signing on behalf of an entity:							
Chelses	a Chapman						
	Typed or Printed Name			(/*,	20		
On Bet	On Behalf of Legaline Corporate Services, INC.			ĨĄ:	22 🖪		
		Capacity		<u>;</u> . ≯:	VO	""	
	FILING S \$5.00 S 25.00	FEES: Active limited liability of Administratively dissolved withdrawn limited liability.	company yed/ voluntarily dis	AHASSEE, FL	2022 NOV 15 AH 10: 3		

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

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