LZO 000049583

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

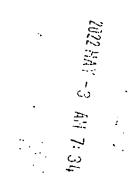
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JUN 15 2021

COVER LETTER

Buckley Handyman Service LLC Name of Limited Liability Company DOCUMENT NUMBER: L20000049583 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 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: 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 withdrawif limited

MAILING ADDRESS:

liability company.

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 provisions of section 605.0115, Florida Statutes, the undersigned,			
United States Corporation Agents, Inc.		, hereby resigns as	= -
Name of Registered Agent		_ , norcoy resigns as	· · · · · ·
Registered Agent for Buck	kley Handyman Service LLC		·
	Name of Limited Liability Company		 ,
L20000049583			
Document Number	er, if known		
A copy of this resignation v	vas mailed to the above listed limited liabili	ty company at its last know	own address.
The agency is terminated an	nd the office discontinued on the 31st day a Signature of Resigning Agen		s statement is filed.
If signing on behalf of an er	ntity:		
С	heyenne Moseley		
_	Typed or Printed Name		
As	sst. Secretary for United States Corporation	Agents, Inc.	
	Capacity	 _	

FILING FEES:

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

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