L20000053209

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(Address)		
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Rhonda Burke LLC Name of Limited Liability Company	
DOCUMENT NUMBER: L20000053209	
The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submit for filing.	tted
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:	
Name of Person at (800) 773-0888 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisio	ns of section 605.0115, Florida Statutes, the undersi	gned,
United States Corp	nereby resigns as	
	Name of Registered Agent	•
Registered Agent for R	honda Burke LLC	7022 HAY
		Ž.
	Name of Limited Liability Company	-1
L20000053209		, P.
Document Nu	umber, if known	ে <u>ন</u> ই
A copy of this resignation	on was mailed to the above listed limited liability co	mpany at its last known address.
The agency is terminate	d and the office discontinued on the 31st day after the	ne date on which this statement is filed.
	Signature of Resigning Agent	
If signing on behalf of a	n entity:	
	Cheyenne Moseley	
	Typed or Printed Name	
	Asst. Secretary for United States Corporation Agen	ts, Inc.
	Capacity	

FILING FEES:

\$ 85.00 \$ 25.00 Active limited liability company
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withdrawn limited liability company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