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(₭€	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Bu	isiness Entity Name))
(Do	ocument Number)	
Certified Copies	Certificates o	of Status
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Special Instructions to	Filing Officer:	
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COVER LETTER

SUBJECT: CO2 Safety Matters LLC	
Name of Limited Liability	Company
DOCUMENT NUMBER: L20000109433	
The enclosed Resignation of Registered Agent for a Limited for filing.	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	
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:	
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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

INHS17 (2/14)

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ons of section 605.0115	, Florida Statutes, the unde	rsigned,		
United States Corp	oration Agents, Inc	3 .	, hereby resigns as		
	Name of Registered Agent	I.	. Hereby resigns as		
Registered Agent for	O2 Safety Matters	LLC			_
					_•
	Name of Limit	ted Liability Company			
L20000109433					
Document N	umber, if known	_			
A copy of this resignati	on was mailed to the ab	pove listed limited liability	company at its last know	wn address	
The agency is terminate	d and the office discon	tinued on the 31st day after	r the date on which this	statement i	s filed.
		CUL			
		Signature of Resigning Agent		707	3
If signing on behalf of a	in entity:		<i>:</i>	! SE	-
	Cheyenne Mosel	еу	•	- 7	T
	·	ped or Printed Name	(0)	· 7	ILE
	Asst. Secretary for Ur	nited States Corporation Ag	ents, Inc.		Π
		Capacity		AH 11: 05	D
				5,	<i>a</i> .
	FILING I \$ 85.00 \$ 25.00	EES: Active limited liability co Administratively dissolve withdrawn limited liabili	ompany ed/voluntarily dissolved ty company	d/	B

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