

L2000011ZZ76

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

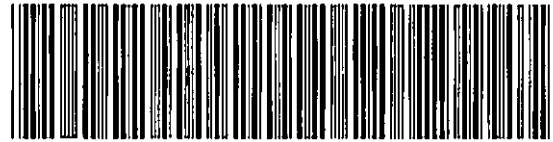
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SmithCo Ventures LLC  
Name of Limited Liability Company

DOCUMENT NUMBER: 1.20000112276

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:

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Name of Person

Smithlaw Attorneys

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Name of Firm/Company

5391 Lakewood Ranch Blvd N STE 203

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Address

Lakewood Ranch, FL 34240

City/State and Zip Code \_\_\_\_\_

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christopher D Smith at ( 941 ) 202-2222  
 \_\_\_\_\_  
 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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  
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 section 605.0115, Florida Statutes, the undersigned,

SmithLaw Attorneys

, hereby resigns as

Name of Registered Agent

Registered Agent for Smithco Ventures, LLC

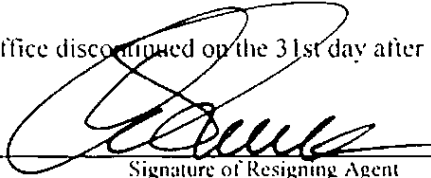
Name of Limited Liability Company

L20000112276

Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.



Signature of Resigning Agent

If signing on behalf of an entity:

Christopher D Smith

Typed or Printed Name

n/a (see below)

Capacity

Please note that "SmithLaw Attorneys" is not a legal entity and that Christopher D. Smith, the president of Christopher D. Smith P.A. d/b/a SmithLaw, had no knowledge of being appointed as reg. agent and did not authorize this appointment.

### 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