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COVER LETTER

FLORIDA CARPET CLEANING SERV SUBJECT:		
Name of Lin	mited Liability	Company
DOCUMENT NUMBER: L20000115744		
The enclosed Resignation of Registered Agent for filing.	for a Limited	l Liability Company and fee are submitted
Please return all correspondence concerning th	is matter to th	ne following:
Chelsea Chapman		
Name of Person		
Legaline Corporate Services, INC.		
Name of Firm/Company		
10601 Clarence Dr Ste 250		
Address		
Frisco, TX 75033-3867		
City/State and Zip Code		
ra@legalinc.com		
E-mail address: (to be used for future annual repor	t notification)	
For further information concerning this matter.	please call:	
Chelsea Chapman	844	386-0178
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Registration Section Division of Corporations

TO:

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

INHS17 (2/14)

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115,	Florida Statutes, the undersigned.
Legalinc Corporate Services, INC.	hereby resigns as
Name of Registered Agent	, neteby resigns as
Registered Agent for FLORIDA CARPET CLEA	ANING SERVICE LLC
Name of Limite	ed Liability Company
L20000115744	
Document Number, if known	- !
A copy of this resignation was mailed to the abo	ove listed limited liability company at its last known address.
\mathcal{M}	inued on the 31st day after the date on which this statement is filed.
	- ,
If signing on behalf of an entity:	2022 F JV
Chelsea Chapman	
••	ed or Printed Name
On Behalf of Legaline C	Corporate Services, INC.
	Capacity CAPACITY
	Capacity STATE STATE
FILING F	res.
© \$ 85.00 © \$ 25.00	Active limited liability company Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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

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