

120 000 138918

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



200375559822

10/27/21--01004--021 \*\*170.00

FILED

2021 OCT 27 AM 8:36

SECRETARY OF STATE  
TALLAHASSEE, FL

J. SIMMONS

NOV 13 2021

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SMART ENERGY ELECTRICAL CONTRACTORS LLC  
\_\_\_\_\_  
Name of Limited Liability Company

**DOCUMENT NUMBER:** L20000138918  
\_\_\_\_\_

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:

Samuel Sandoval

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Name of Firm/Company

2080 CALUMET ST - STE. B

\_\_\_\_\_  
Address

Clearwater, FLorida 33765

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

smartenergy@gmail.com

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

For further information concerning this matter, please call:

Samuel Sandoval

727 325-2001  
at ( )

\_\_\_\_\_  
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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,

Jasatsa Business Services LLC

\_\_\_\_\_  
Name of Registered Agent

, hereby resigns as

Registered Agent for Smart Energy Electrical Contractors LLC

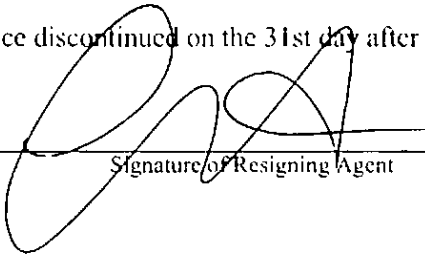
\_\_\_\_\_  
Name of Limited Liability Company

L20000138918

\_\_\_\_\_  
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:

\_\_\_\_\_  
Typed or Printed Name

\_\_\_\_\_  
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**