L20000158982

(Re	equestor's Name)		
(Ac	ddress)		
(Ac	ddress)		
(Ci	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			
<u> </u>			

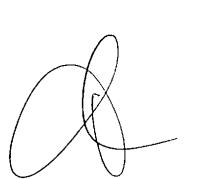
Office Use Only



500397724185

11/15/22--01037--002 **13680.00

2022 NOV 15 PH 12: 32



COVER LETTER

VERSATILE HOME SOLUTIONS LLC SUBJECT: Name of Limited Liability Company DOCUMENT NUMBER: L20000158982 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: 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 report notification) For further information concerning this matter, please call: Chelsea Chapman

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Name of Person

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 pro-	visions of section 605.0115, Florida Statutes, the ur	idersigned,	
Legalinc Corporate Services, INC.		_ , hereby resigns as	
	Name of Registered Agent		
Registered Agent for	VERSATILE HOME SOLUTIONS LLC		
	Name of Limited Liability Company		
L20000158982			
Docume	ent Number, if known		
	nation was mailed to the above listed limited liabilities and the office discontinued on the 31st day a		
The agency is term	Signature of Resigning Age	22 NOV	
If signing on behalf of an entity:		S	
	Chelsea Chapman	PHIZ: 32	
	Typed or Printed Name	———— <u> </u>	
	On Behalf of Legaline Corporate Services, INC.	m. R	
	Capacity		

FILING FEES:

S 85.00 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