20000161518

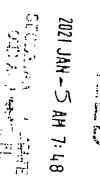
(Re	questor's Name)	.
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nan	ne)
`	·	•
(Do	cument Number)	
,	•	
Certified Copies	Certificates	of Status
	-	
		 _
Special Instructions to	Filing Officer:	
		ļ
-		

Office Use Only



700356800847

01/05/21--01024--007 **25.00



O SIMMONS FEB 1 8 2021

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Macedonia Marble Direct LLC	
Name of Limited Liability Comp	xny
DOCUMENT NUMBER: L20000161518	
The enclosed Resignation of Registered Agent for a Limited Liab for filing.	ility Company and fee are submitted
Please return all correspondence concerning this matter to the foll	owing:
United States Corporation Agents, Inc.	
Name of Person	
Legalzoom.com, Inc.	
Name of Firm/Company	
101 North Brand Blvd. 11th Floor	
Address	
Glendale, CA 91203	
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:	
t in the state of	-0888
Name of Person Area Code Day	time 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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
Clifton Building
2661 Executive Center Circle
Taflahassee, FL 32301

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the unc	dersigned,			
United States Corporation Agents, Inc.	. hereby resigns as	53	202	
Name of Registered Agent Registered Agent for Macedonia Marble Direct LLC			2021 JAN -5	. "Jo" ,
Name of Limited Liability Company		-1 - 12 	-1	of Circ.
L20000161518			7: 48	
Document Number, if known				
A copy of this resignation was mailed to the above listed fimited liabilit				
The agency is terminated and the office discontinued on the 31st day af		this staten	nent is	filed.
If signing on behalf of an entity:				
Cheyenne Moseley				
Typed or Printed Name				
Asst. Secretary for United States Corporation A	Agents, Inc.			
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