## LZO 000 162899

(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:				

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12/2/20

## **COVER LETTER**

			•
SUBJE	CCT: J. SCOTT'S CONTRACTIN		
		Limited Liability	Company
DOCU	MENT NUMBER: L2000016289	19	
The end for filin		gent for a Limited	d Liability Company and fee are submitted
Please i	return all correspondence concernin	g this matter to t	he following:
United	States Corporation Agents, Inc.		
	Name of Person	<del></del>	-
Legalz	Zoom.com, Inc.		
	Name of Firm/Company	<del></del> _	-
101 N	orth Brand Blvd. 11th Floor		
	Address		-
Glenda	ale, CA 91203		
	City/State and Zip Code		-
raresiç	gnations@legalzoom.com		
E-r	nail address: (to be used for future annual i	report notification)	-
For furt	ther information concerning this ma	tter, please call:	
Joyce	Yi	800	773-0888 x7789 Daytime Telephone Number
	Name of Person	Area Code	Daytime Telephone Number

STREET ADDRESS:

Tallahassee, FL 32301

Clifton Building

Registration Section
Division of Corporations

2661 Executive Center Circle

INHS17 (2/14)

P.O. Box 6327

MAILING ADDRESS:

Registration Section Division of Corporations

Tallahassee, FL 32314

## STATEMENT OF RESIGNATION OF REGISTER FOR A CENT FOR A LIMITED LIABILITY COMPANY SECRETARY OF STATE TAILLAHASSEE, FL

Pursuant to the provisions	of section 605.0115. Florida S	tatutes, the undersigned.
United States Corpora	ation Agents, Inc.	, hereby resigns as
	nne of Registered Agent	· (
Registered Agent for J. S	COTT'S CONTRACTING	CONSULTING SERVICES LLC
	Name of Limited Liability	Company
L20000162899		
Document Numb	er, 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 a	nd the office discontinued on t	the 31st day after the date on which this statement is filed.
_	Signature of	Resigning Agent
If signing on behalf of an e	ntity:	
C	heyenne Moseley	
_	Typed or Printe	d Name
A	sst. Secretary for United States	s Corporation 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\$ 85.00 Active limited liability company \$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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