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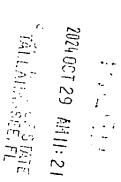
(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Kenny Can Fix It LLC Name of Limited Liability	Company
DOCUMENT NUMBER: L20000169297	Company
The enclosed Resignation of Registered Agent for a Limited for filing.	Liability Company and fee are submitted
Please return all correspondence concerning this matter to the	ne following:
United States Corporation Agents, Inc.	
Name of Person	•
Legalzoom.com, Inc.	
Name of Firm/Company	
9900 Spectrum Dr.	
Address	
Austin, TX 78717	
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:	
Name of Person at (800 Area Code	773-0888)

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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
Tallahassee, FL 32301

ENT OF RESIGNATION OF REGISTRALIA FOR A LIMITED LIABILITY COMPANY 2024007 29 AHII: 21 STATEMENT OF RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of section 605.0115, Florida Statute	S, the undersigned,
United States Corporation Agents, Inc.	
Name of Registered Agent	, hereby resigns as
Registered Agent for Kenny Can Fix It LLC	
Name of Limited Liability Compa	any
L20000169297	
Document Number, if known	
A copy of this resignation was mailed to the above listed limite	ed liability company at its last known address.
The agency is terminated and the office discontinued on the 31	st day after the date on which this statement is filed.
Crik Treutle Signature of Resign	ning Agent
If signing on behalf of an entity:	
Erik Treutlein	
Typed or Printed Name	e
Vice President on behalf of United States C	Corporation Agents, Inc.

Capacity

FILING FEES: \$ 85.00 Active Active limited liability company
Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company \$ 25.00

Make checks payable to Florida Department of State and mail to: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314