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2804 Gateway Oaks Drive #100 Sacramento, CA 95833

' Phone 888-272-3725 Fax 800-603-5868

REFERENCE # MUST BE ON INVOICE TO BE PAID

Date: August 23, 2021 !AE:

Cori Ann Crosthwaite

Vendor#

1960

IEmail:

ccrosthwaite@myparacorp.com

TO:

Florida Department of State

Ref Number:

1636735

New Filing Section - Division of Corporations PO Box 6327 Tallahassee, FL 32314

FAX:

EMAIL:

NAME: **TAG BILLING LLC**

FILE REGISTERED AGENT RESIGNATION

State

FL

PLEASE EMAIL OR FAX A COPY OF RESULTS

If the document is black and white, please return it to via e-mail and regular mail. If the document has color or any raised seals, please send it via:

CALL IMMEDIATELY IF YOU HAVE ANY QUESTIONS OR THE DEADLINE WILL NOT BE MET 888-272-3725

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ons of section 605.0115, Florida Statutes, the under	signed,		
ROCKET LAWYER CORPORATE SERVICES LLC he Name of Registered Agent		hereby resigns as		
		_ , hereby resigns as		
Registered Agent for _	TAG BILLING LLC			
	Name of Limited Liability Company			ı
L20000177535				
Document N	Sumber, if known			
A copy of this resignat	ion was mailed to the above listed limited liability of	ompany at its last known ad	dress.	
The agency is terminat	ed and the office discontinued on the 31st day after	the date on which this stater	nent is	filed.
	Edma Wyaz		2022 AUG	
	Signature of Resigning Agent		AUG	به تر . ا
If signing on behalf of an entity:		- ·	30	 -
	EDNA PERRY	2.4	<u></u>	ь <u>П</u>
	Typed or Printed Name		₽ <u>₽</u>	
	Asst. Secretary Rocket Lawyer Corporate Services L	LC = -	_	_
	Capacity		ယ	

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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