# L20 000 235764

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Dc	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



700372190897

08/27/21--01011--012 \*\*85.00

2021 AUG 27 AM 9: 26 SECTION OF STATE TALLINEASSEE, FL

71 AUG 27 AM 9: 20

-CA 1117

## COVER LETTER

SUBJECT: Name of Limited Liability	Company
DOCUMENT NUMBER: L20000235764	Company
The enclosed Resignation of Registered Agent for a Limited for filing.	I 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:	
800	773-0888
Name of Person Area Code	773-0888 Daytime Telephone Number
Enclosed is a check made payable to the Florida Department liability company or \$25.00 for an administratively dissolved liability approach.	of State for \$85.00 for an active limited

#### MAILING ADDRESS:

TO: Registration Section Division of Corporations

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

# STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the prov	isions of section 605.0115	5. Florida Statutes, the unders	igned.		
United States Corporation Agents, Inc		ouroby racions as	by resigns as		
		iercoy resigns as			
Registered Agent fo	CMH Handyman Se	ervices LLC			-
	Name of Limi	ted Liability Company			<b></b> ٠
L20000235764					
Documer	it Number, if known				
		ntinued on the 31st day after the Signature of Resigning Agent			
If signing on behalf o	of an entity:			. ~3	:
	Cheyenne Moseley			021 SEÇ	
	Typed or Printed Name Asst. Secretary for United States Corporation Agents, Inc.		its, Inc.	2021 AUG 27   SEÇE- PANÇ	
	FILING   \$ 85.00 \$ 25.00	Capacity  FEES:  Active limited liability com Administratively dissolved/ withdrawn limited liability	ripany voluntarily dissolv	AH 9: 26	m O

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