120000 332041

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(expenses 2.p) Hone ny
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER .

TO: Registration Section Division of Corporations	
SUBJECT: Double D Cleaning Services LLC	
Name of Limited Liability	Company
DOCUMENT NUMBER: L20000332041	
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	e 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:	
at (at (773-0888
Name of Person Area Code	Daytime 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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
Tallahassee, FL 32301

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section	605.0115, Florida Statutes, the under	ersigned.
United States Corporation Agents, Inc.		ersigned. SECRETARY hereby resigns as PLLARY AREA AREA
Name of Regi-	stered Agent	. Hereby resigns as
Registered Agent for Double D C	leaning Services LLC	The or
Na	ame of Limited Liability Company	25
L20000332041		(*1
Document Number, if known		
A copy of this resignation was mailed	d to the above listed limited liability	company at its last known address.
The agency is terminated and the off	ice discontinued on the 31st day afte	er the date on which this statement is filed.
	Signature of Resigning Agent	
If signing on behalf of an entity:		
Cheyenne	e Moseley	
·	Typed or Printed Name	
Asst. Secre	tary for United States Corporation Aç	gents, Inc.
	Capacity	

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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