L21000064980

	(Requestor's Name)	
	(Address)	
	(Address)	
•	(City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
	(Business Entity Name)	
	(D	
	(Document Number)	
Certified Copies	_ Certificates of S	tatus
Special Instructions to	Filing Officer:	
		•
	<u>. </u>	

Office Use Only



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CORPORATION SERVICE COMPANY
1201 Hays Street
Tallbassos FL 22201

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195
REFERENCE : 926262 8323810
AUTHORIZATION : Joseph Resident
COST LIMIT : \$ 85.00
ORDER DATE : August 8, 2023
ORDER TIME : 9:18 AM
ORDER NO. : 926262-010
CUSTOMER NO: 8323810
<u>CHANGE</u> OF AGENT
NAME: ELEMENTS AT MERCY LLC
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY
CONTACT PERSON: Eyliena Baker EXT#
EXAMINER:

COVER LETTER

SUBJECT: Name of Limited Liability	Company
DOCUMENT NUMBER: L21000064980	
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:
RESIGNATIONS DEPARTMENT	
Name of Person	
CORPORATION SERVICE COMPANY	
Name of Firm/Company	
251 LITTLE FALLS DRIVE	
Address	
WILMINGTON, DE 19808	
City/State and Zip Code	
ANNUALREPORTS@CSCGLOBAL.COM	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
RESIGNATION DEPT 800	927-9801
Name of Person Area Code	Daytime Telephone Number
Enclosed is a check made payable to the Florida Departmen liability company or \$25.00 for an administratively dissolve limited liability company.	t of State for \$85.00 for an active limited d, voluntarily dissolved or withdrawn

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section Division of Corporations

TO:

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the prov	isions of section 605.01	15, Florida Statutes, the	undersigned.			
CORPORATION SERVICE COMPANY herek		hereby resign	eby resigns as			
Name of Registered Agent						Hereoy resign
Registered Agent fo	Elements At Mercy LLC	-				
	Name of Li	mited Liability Company				•
L21000064980						
Documer	nt Number, if known					
-	nation was mailed to the nated and the office disco		y after the date on wh			filed.
If signing on behalf	of an entity:			٦ ک	20	
BY EYLIENA BAKER			/LL/	23 P	أسلعت	
	VICE PRESIDENT	Typed or Printed Name		AHASSE	2023 AUG 16	
	FILING \$ 85.00 \$ 25.00	Capacity FEES: Active limited liabi Administratively di withdrawn limited	lity company ssolved/ voluntarily o liability company	OF STATE E.FLORIDA	AM 10: 0 I	

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