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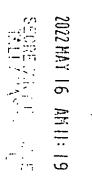
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: 4 J's Towing and Hauling LLÇ	
Name of Limited Liability Company	
DOCUMENT NUMBER: L21000065931	
The enclosed Resignation of Registered Agent for a Limited Liability Company and for filing.	ee are submitted
Please return all correspondence concerning this matter to the following:	
United States Corporation Agents, Inc.	
Name of Person	
Legalzoom.com, Inc.	
Name of Firm/Company	
9900 Spectrum Dr.	20
Address	22 H
Austin, TX 78717	2022 HAY 16
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 (800 773-0888	
Name of Person Area Code Daytime Telephone Numb	per

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 provision	ns of section 605.0115, Florida :	Statutes, the undersig	gned,			
United States Corporation Agents, Inc. hereby resign		ereby resigns as				
	Name of Registered Agent	·•	, 3			
Registered Agent for $\frac{4}{}$	J's Towing and Hauling LI	<u>-C</u>				
	Name of Limited Liability	y Company			······	
L21000065931						
Document Nu	mber, if known					
A copy of this resignation	n was mailed to the above listed	d limited liability con	npany at its last k	nown addi	ress.	
The agency is terminated If signing on behalf of a	C	the 31st day after the	e date on which t	his stateme	ent is 2022 HAY	led.
Trong on oursan or a	Cheyenne Moseley				H Y	-
	Typed or Prin	ted Name			16	• • • • • • • • • • • • • • • • • • • •
	Asst. Secretary for United State		s, Inc.		332	
	Capacity			1	61:11H	- 42.4
	FILING FEES: \$ 85.00 Active I \$ 25.00 Administration withdra	imited liability comp stratively dissolved/ iwn limited liability o	oany voluntarily disso company	lved/		

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