L21000013235

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· 2/11/2023

COVER LETTER

GAMBLECANDLE LLC SUBJECT:	
Name of Limited Liability	Company
DOCUMENT NUMBER: L21000083235	
The enclosed Resignation of Registered Agent for a Limited for filing.	d Liability Company and fee are submitted
Please return all correspondence concerning this matter to the	ne following:
Chelsea Chapman	
Name of Person	
Legaline Corporate Services, INC.	
Name of Firm/Company	
10601 Clarence Dr Ste 250	
Address	
Frisco, TX 75033-3867	
City/State and Zip Code	
ra@legalinc.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Chelsea Chapman 844	386-0178
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

INHS17 (2/14)

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ons of section 605.0115, Florida Statutes, t	he undersigned,	
Legaline Corporate Serv	vices, INC.	, hereby resigns as	
	Name of Registered Agent	, nereby resigns as	
Registered Agent for	GAMBLECANDLE LLC		
	Name of Limited Liability Company		·
L21000083235			
Document N	lumber, if known		
	ion was mailed to the above listed limited led and the office discontinued on the 31st of		
If signing on behalf of	Signature of Resigning an entity:	, Agent C	2022 NOV 1 5
	Chelsea Chapman		40M
	Typed or Printed Name On Behalf of Legaline Corporate Services, Capacity	INC.	15 AM 7: 29

FILING FEES:

© \$ 85.00 Active limited liability company

O \$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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