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2804 Gateway Oaks Drive #100 Sacramento, CA 95833

Phone 888-272-3725 Fax 800-603-5868

### REFERENCE # MUST BE ON INVOICE TO BE PAID

Date:

May 12, 2022

AE:

Cori Ann Crosthwaite

Vendor#

1960

. IEmail:

ccrosthwaite@myparacorp.com

TO:

Florida Department of State

Division of Corporations PO Box 6327

Tallahassee, FL 32314

1787665

Return Shipping:

Ref Number:

FAX:

850-687-6381

**EMAIL:** 

NAME:

K.A.D.G REPAIR AND SERVICES LLC

#### **FILE REGISTERED AGENT RESIGNATION**

State

FL

#### PLEASE EMAIL OR FAX A COPY OF RESULTS

If the document is black and white, please return it to via e-mail and regular mail. If the document has color or any raised seals, please send it via:

CALL IMMEDIATELY IF YOU HAVE ANY QUESTIONS OR THE DEADLINE WILL NOT BE MET 888-272-3725

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

Pursuant to the provis	ions of section 605.0115, Florida Statutes, th	e undersigned,			
ROCKET LAWYER CORPORATE SERVICES LLC hereby		, hereby resigns as			
	Name of Registered Agent	,,, g			
Registered Agent for	K.A.D.G Repair and Services LLC				
	Name of Limited Liability Company	<del></del>			
L21000157494					
Document	Number, if known				
A copy of this resigna	tion was mailed to the above listed limited li	ability company at its last kno	own addr	ess.	
The agency is termina	ted and the office discontinued on the 31st d	ay after the date on which thi	s stateme	nt is file	d.
	Palma Winz				
	Signature of Resigning	Agent	<b>4 26</b>		į
If signing on behalf of	an entity:	ÄLL	2022 MAY 19 Secretary	777	; !, .
	EDNA PERRY	A:	<u> </u>	United entities	
	Typed or Printed Name	ervices LLC		) (**C**0	
	Asst. Secretary Rocket Lawyer Corporate Se	ervices LLC	두 중		
	Capacity		AH II: IT		
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FILING FEES:
\$ 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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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