L21000199832

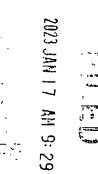
(Requestor's Name)	
(Nequestor's Name)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
(,	
Certified Copies Certificates of Status	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

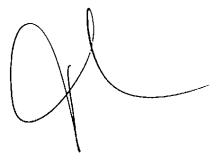
Office Use Only



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01/17/23--01039--018 ++25.00





COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Kerry's home repair LLC				
Name of Limited Liability	Company	_		
DOCUMENT NUMBER: L21000199832				
The enclosed Resignation of Registered Agent for a Limited for filing.	l Liability Company and fee	are su	bmitte	d
Please return all correspondence concerning this matter to the	ne following:			
United States Corporation Agents, Inc.				
Name of Person				
Legalzoom.com, Inc.				
Name of Firm/Company		;	20	
9900 Spectrum Dr.		-	2023 JAN 17 AM 9: 29	بار معادده
Address		- 	=	د . ده برد . ده جری
Austin, TX 78717		1.488500	1 2	4 - 1 €
City/State and Zip Code		<u> </u>	== •	ASSES.
raresignations@legalzoom.com		<u></u> ;	: 29	
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
800	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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 provis	sions of section 605.0115, Florida Statutes, the under	-
United States Co	rporation Agents, Inc.	, hereby resigns as
	Name of Registered Agent	Thereby resigns us
Registered Agent for	Kerry's home repair LLC	
	Name of Limited Liability Company	·
L21000199832		207
Document	Number, if known	23
		2023 JAH
	ation was mailed to the above listed limited liability of ated and the office discontinued on the 31st day after Signature of Resigning Agent	company at its last known address.
	ation was mailed to the above listed limited liability of ated and the office discontinued on the 31st day after Signature of Resigning Agent	the date on which this statements file
The agency is termina	ation was mailed to the above listed limited liability of ated and the office discontinued on the 31st day after Signature of Resigning Agent	the date on which this statements file
The agency is termina	ation was mailed to the above listed limited liability of ated and the office discontinued on the 31st day after Signature of Resigning Agent of an entity:	the date on which this statements file
The agency is termina	ation was mailed to the above listed limited liability of ated and the office discontinued on the 31st day after Signature of Resigning Agent f an entity: Cheyenne Moseley	the date on which this statements file

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