L21000214045

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
J DENNIG
AUG 1 1 2023





300410815863

06/23/23--01019--001 **25.00

SPURE TARY OF STATE CORPORATION NO. 111N 23 AM 8: 36

COVER LETTER

Division of Corporations SUBJECT: A&A Pacific Holdings LLC Name of Limited Liability Company DOCUMENT NUMBER: L21000214045 The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing. 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. Address Austin, TX 78717 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:

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

TO:

Registration Section

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.011	5. Florida Statutes, the undersig	ned,		
United States Corporation Agents, Inc.		rahy rasiyna as		
Name of Registered Age	ereby resigns as			
Registered Agent for A&A Pacific Holdin	gs LLC			-
Name of Lin	nited Liability Company			
L21000214045				
Document Number, if known				
A copy of this resignation was mailed to the	above listed limited liability con	npany at its last known	address.	
The agency is terminated and the office disco	ntinued on the 31st day after the	e date on which this sta	itement is	s filed.
	au			
	Signature of Resigning Agent			
If signing on behalf of an entity:				
Cheyenne Mose	eley			
Ţ	yped or Printed Name	<u></u>	20	
Asst. Secretary for United States Corporation Agents, Inc.		23	造	
	Capacity		2023 JUN 23	RE IARY
FILING \$ 85.00 \$ 25.00	FEES: Active limited liability compaddministratively dissolved/y withdrawn limited liability c	any oluntarily dissolved/ ompany	AM 8: 36	ال 20 STAIE (STAIE) (STAIE) (STAIE)

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