# 121000246239

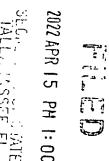
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## COVER LETTER :

Division of Corporations	
Fitzhamel Group, LLC SUBJECT:	
Name of Limited Liability Company	
DOCUMENT NUMBER: L21000246239	
The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submorfilling.	nitted
Please return all correspondence concerning this matter to the following:	
Brandy O'Dell	
Name of Person	
KKOS Lawyers	
Name of Firm/Company	
1883 W Royal Hunte Dr. Suite 200	
Address	
Cedar City, UT 84720	
City/State and Zip Code	
jhamel@hamelytics.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Brandy O'Deli 435 586-9366 Ext 2040 at ( )	
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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
The Centre of Tallahassee
2415 N. Monroe Street. Suite 810
Tallahassee, FL 32303

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

Pursuant to the provis	ions of section 605.0115, Florida Statutes, the	undersigned.	
Registered Agent Solutions, Inc.		hereby resigns as	
	Name of Registered Agent	. Hereby resigns as	
Registered Agent for	Fitzhamel Group, LLC		
	Name of Limited Liability Company		<del></del> ·
L21000246239			
Document 1	Number, if known		
	tion was mailed to the above listed limited liab		
C .	Brenden Wrigel Signature of Resigning A		
If signing on behalf of	an entity:	es <del>L</del> ift	202
	Brendan Wangel	ALI.	7022 APR 15
	Typed or Printed Name		
	Asst. Secretary		
	Capacity	Wilder St. FL	TH  : 00

### FILING FEES:

\$ 85.90 | 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\$ 25.00 | Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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