n21000776993

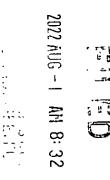
(Re	equestor's Name)			
(Ad	ldress)			
(Ad	dress)			
(Cit	ty/State/Zip/Phone #	f)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Name)		
(Document Number)				
Certified Copies	_ Certificates o	of Status		
Special Instructions to Filing Officer:				

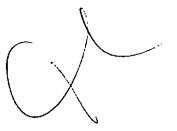
Office Use Only



700391812207

08/01/22--01006--014 **25.00





COVER LETTER

Division of Corporations			
SUBJECT:Avila cleaning LLC			
Name of Limited Liability	Company		
DOCUMENT NUMBER: L21000276993			
The enclosed Resignation of Registered Agent for a Limited for filing.	Liability Company and fee are	submitted	J
Please return all correspondence concerning this matter to the	e following:		
United States Corporation Agents, Inc.			
Name of Person			
Legalzoom.com, Inc.			
Name of Firm/Company			
9900 Spectrum Dr.			
Address		20	
Austin, TX 78717	- -	2022 AUG - 1	- 1
City/State and Zip Code	:	1	*12.4
raresignations@legalzoom.com			; U (
E-mail address: (to be used for future annual report notification)	•••	æ	
For further information concerning this matter, please call:	•	AH 8: 32	
at (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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

TO: Registration Section

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 provisio	ns of section 605.0115, Florida Statutes, the under	rsigned.		
United States Corporation Agents, Inc. , hereby resig		hereby resigns as		
		. Hereby resigns as		
Registered Agent for A	vila cleaning LLC			
<u> </u>	Name of Limited Liability Company			•
L21000276993				
Document Nu	imber, if known			
A copy of this resignation	on was mailed to the above listed limited liability o	company at its last known a	ddress.	
The agency is terminate	d and the office discontinued on the 31st day after	the date on which this state	ement is	filed.
	Signature of Resigning Agent	·	2022 NUG	za : 1
If signing on behalf of an entity:			G G	
	Cheyenne Moseley	•		
	Typed or Printed Name Asst. Secretary for United States Corporation Age Canacity	ents, Inc.	AM 8: 3	

FILING FEES: \$ 85.00 Active \$ 25.00 Admi Active limited liability company
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