# 121000406755

(Requestor's Name)		
(Add	dress)	
•	•	
(Address)		
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
_	_	_
(Business Entity Name)		
(Document Number)		
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Certified Copies	_ Certificates	s of Status
Special Instructions to		
Special Instructions to Filing Officer:		

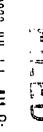
Office Use Only



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#### COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Sub Hub Deli and Produce of Lakeland LLC Name of Limited Liability		
DOCUMENT NUMBER: L21000406755		
The enclosed Resignation of Registered Agent for a Limited for filing.	l Liability Company and fee are	submitted
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		
9900 Spectrum Dr.		21
Address		022
Austin, TX 78717	ļ.	
City/State and Zip Code	5	
raresignations@legalzoom.com	<i>∵.</i> ;†:	2022 JUL 11 AM 9: 07
E-mail address: (to be used for future annual report notification)	- 	9: O
For further information concerning this matter, please call:		1
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

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 provision	ons of section 605.0115, Florida Statutes, the unde	ersigned,
United States Corporation Agents, Inc.		, hereby resigns as
	Name of Registered Agent	· · · · · · · · · · · · · · · · · · ·
Registered Agent for	Sub Hub Deli and Produce of Lakeland Lt	LC
	Name of Limited Liability Company	,
L21000406755		
Document N	lumber, if known	
A copy of this resignat	ion was mailed to the above listed limited liability	company at its last known address.
The agency is terminat	ed and the office discontinued on the 31st day afte	er the date on which this statement is filed.
	Signature of Resigning Agent	2022 JUL 1
If signing on behalf of an entity:		
	Cheyenne Moseley	TANSSEC.
	Typed or Printed Name	
	Asst. Secretary for United States Corporation Ag	gents, Inc.
	Capacity	· -

### 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