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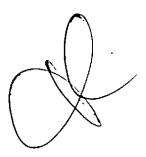
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TALLAHASSEE, FL



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: A&L Kayaks LLC

Name of Limited Liability Company

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:

DOCUMENT NUMBER: L21000523792

United States Corporation Agents, Inc.	
Name of Person	,
Legalzoom.com, Inc.	
Name of Firm/Company	
9900 Spectrum Dr.	975 -415
Address	ALL CONTRACTOR
Austin, TX 78717	A S
City/State and Zip Code	SS
raresignations@legalzoom.com	بن انبار
E-mail address: (to be used for future annual report notification)	(— <u>)</u>
For further information concerning this matter, please call:	
800 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 provisio	ns of section 605.011	5. Florida Statutes, the under	signed,			
United States Corporation Agents, Inc.		, hereby resigns as				
	Name of Registered Age					
Registered Agent for A	&L Kayaks LLC					
	Name of Lin	nited Liability Company			·	
L21000523792						
Document Nu	imber, if known					
A copy of this resignation	on was mailed to the	above listed limited liability c	ompany at its last k	nown ad	dress.	
The agency is terminate	d and the office disco	ontinued on the 31st day after Signature of Resigning Agent	the date on which the	his staten	nent is	filed.
If signing on behalf of a	n entity:					
	Cheyenne Mose	eley		ري جات	202	
	7	yped or Printed Name			2023 FEB 22	أحاكت
	Asst. Secretary for U	United States Corporation Age	nts, Inc.	<u>≥</u> 5	œ	معوا معدد آر ب
	EH ING	Capacity		AHASSEE, FI	2 AH II: 45	
	FILING \$ 85.00 \$ 25.00	Active limited liability cor Administratively dissolved withdrawn limited liability	d/voluntarily disso	lved/	ş	

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