h22000036262

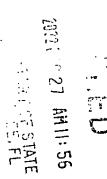
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Certified Copies	Certificate	s of Status
Special Instructions to F	iling Officer:	

Office Use Only



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DEC 27 2022



COVER LETTER

то:	Registration Section Division of Corporations	
SUB	JECT: engicor LLC	
DOC	Name of Limited Liability UMENT NUMBER: L22000036262	Company
	enclosed Resignation of Registered Agent for a Limited	Liability Company and fee are submitted
Pleas	e return all correspondence concerning this matter to th	e following:
Unite	ed States Corporation Agents, Inc.	
	Name of Person	
Lega	alzoom.com, Inc.	
	Name of Firm/Company	
9900) Spectrum Dr.	
	Address	
Aust	in, TX 78717	
	City/State and Zip Code	
rares	signations@legalzoom.com	
 i	E-mail address: (to be used for future annual report notification)	
For fi	urther information concerning this matter, please call:	
	800 at (773-0888) Daytime Telephone Number
	Name of Person Area Code	Daytime Telephone Number
liabil	osed is a check made payable to the Florida Departmen ity company or \$25.00 for an administratively dissolve ity company.	t of State for \$85.00 for an active limited d, voluntarily dissolved or withdrawn limite

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 provis	sions of section 605.0115, Florida Statutes, the undersi	igned,	
United States Corporation Agents, Inc hereby resi		hereby resigns as	
Registered Agent for	engicor LLC		
	Name of Limited Liability Company	,	
L22000036262			
Document	Number, if known		
	ation was mailed to the above listed limited liability co		l.
	Signature of Resigning Agent	2022	
If signing on behalf of an entity:			
	Cheyenne Moseley		ت د ۵
	Typed or Printed Name		- -}
	Asst. Secretary for United States Corporation Ager	Aff II: 56	e F
	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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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