

L22000036433

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

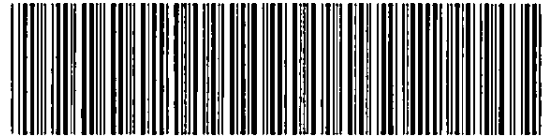
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Rec'd 10-3-25

Office Use Only



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2025 OCT -3 AM 10:05

FILED

For 10-14-25



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 8, 2025

TAMARA GARCIA
2131 RIDGE RD S U119
LARGO, FL 33778

SUBJECT: CRG HOME SERVICES LLC
Ref. Number: L22000036433

We have received your document and check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

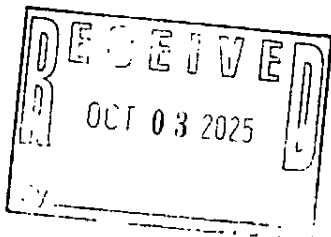
You have submitted the wrong forms. Complete and return the enclosed blank form(s). THIS MONEY ORDER WILL BE AN OVERPAYMENT, EXTRA PAYMENT NOT NEEDED

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6053.

Frederica S McCloud
Document Specialist

Letter Number: 825A00017681



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CRG Home Services LLC
Name of Limited Liability Company

DOCUMENT NUMBER: _____

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:

Tamara Garcia
Name of Person

CRG Home Services LLC
Name of Firm/Company

2131 Ridge Rd S Unit 9
Address

Largo FL 33718
City/State and Zip Code

Tammy-LD@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tamara Garcia at (727) 452-4965
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 provisions of section 605.0115, Florida Statutes, the undersigned,

Tamara Garcia

Name of Registered Agent

, hereby resigns as

Registered Agent for

CRG Home Services LLC

Name of Limited Liability Company

L22000036433

Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.



Signature of Resigning Agent

If signing on behalf of an entity:

Typed or Printed Name

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

2025 OCT -3 AM 10:05