L22000110788

(Requestor's Name)
(Address)
(Address)
(City)Chata (Zia)Dhana 40
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Fino's rental services LLC	
Name of Limited Liability	Company
DOCUMENT NUMBER: L22000110788	
The enclosed Resignation of Registered Agent for a Limited for filing.	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.	
Address	
Austin, TX 78717	
City/State and Zip Code	
raresignations@legalzoom.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Name of Person at (Area Code	773-0888) Daytime Telephone Number
Name of resont Area Code	Daytime rereptione runtoer

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 provide	reception Amenda Ima	
United States Co	rporation Agents, Inc.	, hereby resigns as
	Name of Registered Agent	
Registered Agent for	Fino's rental services LLC	·
		,
	Name of Limited Liability Company	
L22000110788		
Document	Number, if known	
	Number, if known ation was mailed to the above listed limited liab	ility company at its last known address.
A copy of this resign	ation was mailed to the above listed limited liab	
A copy of this resign		
A copy of this resign	ation was mailed to the above listed limited liab	after the date on which this statement is f
A copy of this resign	ation was mailed to the above listed limited liab	after the date on which this statement is f
A copy of this resign The agency is termin	ation was mailed to the above listed limited liab ated and the office discontinued on the 31st day Signature of Resigning Ag	after the date on which this statement is f
A copy of this resign The agency is termin	ation was mailed to the above listed limited liab ated and the office discontinued on the 31st day Signature of Resigning Ag	after the date on which this statement is f
A copy of this resign The agency is termin	ation was mailed to the above listed limited liab ated and the office discontinued on the 31st day Signature of Resigning Ag	after the date on which this statement is f
A copy of this resign	ation was mailed to the above listed limited liab ated and the office discontinued on the 31st day Signature of Resigning Age f an entity: Cheyenne Moseley	ent 2023

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