# L22000128477

(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:		
J. HORNE		
JUL 1 5 2024		

Office Use Only



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06/21/24--01025--019 \*\*25.00



### **COVER LETTER**

**TO:** Registration Section Division of Corporations

SUBJECT: KJ Consolidated LLC	
Name of Limited Liability	Company
DOCUMENT NUMBER: L22000128477	
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 th	e 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:	
at ( 800	773-0888
Name of Person at ( at (	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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 provisions of section 605.0115. Florida Statutes, the undersigned	ed. 🔀 🔥
United States Corporation Agents, Inc.	ed.  eby resigns as
Name of Registered Agent	oy resigns as
Registered Agent for KJ Consolidated LLC	2 1
Name of Limited Liability Company	
L22000128477	0
Document Number, if known	
A copy of this resignation was mailed to the above listed limited liability comp	
The agency is terminated and the office discontinued on the 31st day after the continued on the 31st day after the 31	
If signing on behalf of an entity:	
Erik Treutlein	
Typed or Printed Name	
Vice President for United States Corporation Agents, I	Inc.
Capacity	<del></del>

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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