# L22000138978

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

Division of Corporations SUBJECT: Steel Wing Wiring L.L.C. Name of Limited Liability Company DOCUMENT NUMBER: L22000138978 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: 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

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

TO:

Registration Section

# STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ns of section 605.011	<ol><li>Florida Statutes, the under</li></ol>	signed,			
United States Corporation Agents, Inc.			hereby resigns	as		
Name of Registered Agent						
Registered Agent for S	teel Wing Wiring	L.L.C.				_
						,
	Name of Lin	nited Liability Company				_
L22000138978						
Document N	umber, if known					
A copy of this resignati	on was mailed to the :	above listed limited liability of	company at its la	st known	addres	is.
The agency is terminate	ed and the office disco	ontinued on the 31st day after	the date on whi	ch this sta	atement	is filed.
		Signature of Resigning Agent				
If signing on behalf of a	m entity:					
	Cheyenne Mose	eley				
	Typed or Printed Name Asst. Secretary for United States Corporation Age		ents, Inc.	TALLAHAS	2023 AUG 17	
	Capacity			<u> </u>	au)	
	FILING \$ 85.00 \$ 25.00	FEES:  Active limited liability co Administratively dissolve withdrawn limited liabili	mpany d/ voluntarily d tv company	50 71 71 72	17 AM 8: 17	٠

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