122000168714

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
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PICK-UP	MAIT	MAIL
	siness Entity Name	
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	cument Number)	
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Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations	
Division of Corporations	
SUBJECT:DavDon Plumbing LLC	
Name of Limited Liability Co	ompany
DOCUMENT NUMBER: L22000168714	
The enclosed Resignation of Registered Agent for a Limited L for filing.	iability Company and fee are submitted
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:	
	773-0888
Name of Person at () 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions	s of section 605.011	5, Florida Statutes, the unde	rsigned,		
United States Corporation Agents, Inc.		k andra matana			
		nt	_ , hereby resigns as		
Registered Agent for Da	vDon Plumbing	LLC			
<u> </u>	Name of Lin	nited Liability Company		<u> </u>	•
L22000168714					
Document Nun	iber, if known	 			
The agency is terminated	and the office disco	ntinued on the 31st day after Signature of Resigning Agent			filed.
If signing on behalf of an	·				
- -	Cheyenne Moseley),),	2022	
<u>-</u>	Typed or Printed Name Asst. Secretary for United States Corporation Agents, Inc. Capacity		17. 10.	2022 JUL 1	
FILING FEES: \$ 85.00 Active limited liabi \$ 25.00 Administratively di			mpany d/ voluntarily dissolved/ ly company	LEJ FLORIÐA	PH 2: 23

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