L22 000 188672

(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:

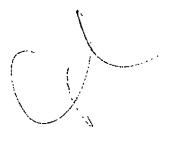




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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Five Brothers Concrete C			
Name of Limited Liability	Company		
DOCUMENT NUMBER: L22000188672			
The enclosed Resignation of Registered Agent for a Limited for filing.	d 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.		2072 577	
Name of Firm/Company	•	-5 -5	-
9900 Spectrum Dr.		9 1	
Address	•	細	, B ;
Austin, TX 78717	•	9.	محي
City/State and Zip Code		ယ	
raresignations@legalzoom.com			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
800 at (773-0888		
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	s of section 605.0115, Flo	rida Statutes, the unde	rsigned,		
CHEYENNE MOSELEY, US CORP. AGENTS Name of Registered Agent		, hereby resigns as			
					Registered Agent for Fiv
	Name of Limited Li	ability Company			.,
L22000188672					
Document Nur	nber, if known				
A copy of this resignatio	n was mailed to the above	listed limited liability	company at its last known	address.	
The agency is terminated	and the office discontinue	ed on the 31st day after	r the date on which this stat	tement is	s filed.
	Signi	ature of Resigning Agent			
If signing on behalf of ar	entity:				
	Cheyenne Moseley			2022 STP	
	Typed o	r Printed Name		.0.	
	Asst. Secretary for United	States Corporation Ag	ents, Inc.		,
	Сар	pacity	· 	91	·
				AH 9:	. 00
	FILING FEE. \$ 85.00 Act \$ 25.00 Add wit	S: live limited liability coministratively dissolve thdrawn limited liabili	ompany ed/ voluntarily dissolved/ ty company	9: 13	

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