L22000252348

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S. PRATHER

COVER LETTER

Registration Section Division of Corporations SUBJECT: TD Lawn Ranger LLC Name of Limited Liability Company DOCUMENT NUMBER: L22000252348 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ons of section 605.01	15, Florida Statutes, the under	signed,
United States Corporation Agents, Inc.			, hereby resigns as
Name of Registered Agent			
Registered Agent for	D Lawn Ranger l	LC	
	Name of Lir	mited Liability Company	,
L22000252348			
Document N	umber, if known		
A copy of this resignati	on was mailed to the	above listed limited liability of	company at its last known address.
The agency is terminate		ontinued on the 31st day after	the date on which this statement is filed.
		Signature of Resigning Agent	
If signing on behalf of a	an entity:		2021
Erik Treutlein			
	-	Typed or Printed Name	1
Vice President on behalf of United States Corporation Agents, Inc.			gents, Inc.
Capacity			
			ក . ប
	FILING \$ 85.00 \$ 25.00	FEES: Active limited liability con Administratively dissolved withdrawn limited liabilit	mpany d/ voluntarily dissolved/

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