# L77000 376144

(Requestor's Name)
(Address)
(Address)
(/ iduleds)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(2-2
(6)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





500417786435

10/30/23--01006--016 \*\*25.00

## **COVER LETTER**

**TO:** Registration Section Division of Corporations

LC	
Company	
Liability Company and fee are submi	tted
ne following:	
~	
· = = = = = = = = = = = = = = = = = = =	
	: 5
- -	こつか
773-0888	
Daytime Telephone Number	
1	Liability Company and fee are submine following:

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

INHS17 (2/14)

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

Pursuant to the provision	ons of section 605.0115, Florida Statutes, the under	rsigned.
United States Corp	poration Agents, Inc.	, hereby resigns as
	Name of Registered Agent	, hereby resigns do
Registered Agent for _	Blasini Notary Solutions LLC	
	Name of Limited Liability Company	
L22000326144		
Document N	umber, if known	
A copy of this resignati	on was mailed to the above listed limited liability	company at its last known address.
The agency is terminate	ed and the office discontinued on the 31st day after	the date on which this statement is filed.
	Signature of Resigning Agent	923 (** 1 30
If signing on behalf of a	an entity:	
	Cheyenne Moseley	
	Typed or Printed Name	
	Asst. Secretary for United States Corporation Age	ents, Inc.
	Capacity	

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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