L22000369666

(Requestor's Name)		
(Addre	·ss)	
(Addre	ss)	
(City/S	tate/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Busin	ess Entity Nam	e)
(Docur	nent Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fili	ng Officer:	

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COVER LETTER

Registration Section Division of Corporations SUBJECT: Anywhere car fix LLC Name of Limited Liability Company DOCUMENT NUMBER: L22000369666 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

United States Cor	poration Agents, Inc.	, hereby resigns as	
Name of Registered Agent		credy resigns as	
Registered Agent for _	Anywhere car fix LLC	<u></u>	
	Name of Limited Liability Company	<u></u>	
L22000369666			
Document?	Sumber, if known		
A copy of this resignat	ion was mailed to the above listed limited liability	company at its last known address.	
The agency is terminal	ed and the office discontinued on the 31st day after	r the date on which this statement is filed	
	Signature of Resigning Agent	2023 f · · ;	
If signing on behalf of an entity:			
	Cheyenne Moseley	22	
	Typed or Printed Name		
	Asst. Secretary for United States Corporation Ag	ents, Inc.	
	Capacity	ents. Inc. 10 29	

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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