La3000043338

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Only State) Light Holle #7
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.
J. HODAIR
I'm.
J. HORNE JUN 2 6 2024

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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Advanced Coaching System	ems LLC
Name of Limited Liability	Company
DOCUMENT NUMBER: L23000093338	<u> </u>
The enclosed Resignation of Registered Agent for a Limited for filing.	Liability Company and fee are submitted
Please return all correspondence concerning this matter to the	e 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:	
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 prov	isions of section 605.0115, Florida Statutes, th	ne undersigned.	
United States C	orporation Agents, Inc.	. hereby resigns as	107
	Name of Registered Agent	. Hereby resigns as	
Registered Agent fo	Advanced Coaching Systems LLC		2024 16 2
	Name of Limited Liability Company		
	Same of Linunea Gaomy Company		# 04 # 04
L23000093338			5
Documer	nt Number, if known		
The agency is terming the agency is terming the agency is terming the agency is a the agency is the agency is the agency is the agency is a the agency is a supplication of the	Signature of Resigning		statement is filed.
ir signing on oction	•		
	Cheyenne Moseley		
	Typed or Printed Name Asst. Secretary for United States Corpora	tion Agents, Inc.	
	Capacity		
	FILING FEES: \$ 85.00 Active limited liab \$ 25.00 Administratively d	oility company lissolyed/ voluntarily dissolved	V

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

Active limited liability company
Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company