L23000141491

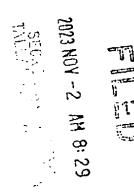
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer.
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COVER LETTER .

SUBJECT: NewSpring Church LLC	
Name of Limited Liability	Company
DOCUMENT NUMBER: L23000141491	·
The enclosed Resignation of Registered Agent for a Limited for filing.	I 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.	
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:	
at (800	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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

TO:

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	s of section 605.0115, Florid	da Statutes, the unde	rsigned,			
United States Corpo	oration Agents, Inc.		, hereby resigns as			
	Name of Registered Agent		, hereby resigns as			
Registered Agent for $\frac{N\epsilon}{}$	wSpring Church LLC					
	Name of Limited Liab	ility Company		<u>_</u>	·	
L23000141491						
Document Nur	nber, if known					
A copy of this resignation	n was mailed to the above lis	sted limited liability	company at its last k	nown add	ress.	
The agency is terminated	and the office discontinued	on the 31st day after	the date on which t	his statem	ent is f	iled.
	Signatu	re of Resigning Agent				
lf signing on behalf of an	entity:			E S	2023	
	Cheyenne Moseley				2023 NOV	
	Typed or P	rinted Name		: :-	1	محتدات محتددت
	Asst. Secretary for United St	tates Corporation Age	ents, Inc.	41 +	2	1 1075 1 1075
	Capac	ity		 .		
					8: 29	
	\$ 25.00 Admii	e limited liability co nistratively dissolve Irawn limited liabili	d/voluntarily disso	lved/		

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