# L230004116868

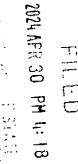
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### **COVER LETTER**

TO: Registration Section
Division of Corporations

Name of Limited Liability Company  DOCUMENT NUMBER: L23000416868
DOCUMENT NUMBER 1 23000416868
DOCOMENT NOMBER: 770000
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 at (800 ) 773-0888  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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 provisi-	ons of section 605.0115, Florida Statutes, the unders	signed,
United States Corporation Agents, Inc.		harahu pisiung as
Name of Registered Agent , hereby resigns as		nereoy resigns as
Registered Agent for _	JOSE EQUINE GROOMING AND CARE L	LC To The Control of
	Name of Limited Liability Company	
L23000416868		LC BOLLS
Document N	Sumber, if known	
	ion was mailed to the above listed limited liability co	
	Signature of Resigning Agent	
If signing on behalf of	an entity:	
	Cheyenne Moseley	
	Typed or Printed Name	<del></del>
	Asst. Secretary for United States Corporation Ager	nts, 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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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