

L23000486100

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

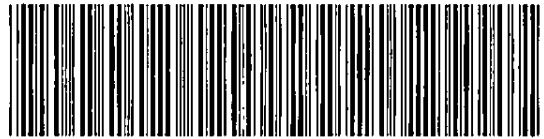
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

J. HORNE  
AUG 16 2024

Office Use Only



500434517775

08/09/24--01013--020 \*\*110.00

FILED  
2024 AUG -9 PM 3:44  
FEDERAL BUREAU OF INVESTIGATION  
U.S. DEPARTMENT OF JUSTICE

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** TRIGGER CONSTRUCTION LLC  
Name of Limited Liability Company

**DOCUMENT NUMBER:** L23000486700

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:

CHAD WANDRICK  
Name of Person

TRIGGER CONSTRUCTION LLC  
Name of Firm/Company

1151 TROON DRIVE N  
Address

MIRAMAR BEACH FL 32550  
City/State and Zip Code

CWANDRICK21@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CHAD WANDICK at (540) 226-9197  
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

SALVADOR ALDAMA \_\_\_\_\_, hereby resigns as

\_\_\_\_\_  
Name of Registered Agent

Registered Agent for TRIGGER CONSTRUCTION LLC

\_\_\_\_\_  
Name of Limited Liability Company

L23000486700

\_\_\_\_\_  
Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

  
\_\_\_\_\_  
Signature of Resigning Agent

If signing on behalf of an entity:

CHAD WANDRICK

\_\_\_\_\_  
Typed or Printed Name

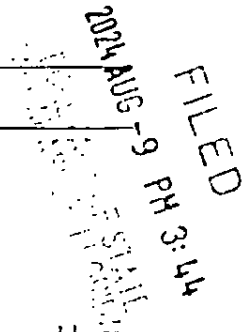
REGISTERED AGENT

\_\_\_\_\_  
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**



## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** TRIGGER CONSTRUCTION LLC  
Name of Limited Liability Company

**DOCUMENT NUMBER:** L23000486700

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:

CHAD WANDRICK  
Name of Person

TRIGGER CONSTRUCTION LLC  
Name of Firm/Company

1151 TROON DRIVE N  
Address

MIRAMAR BEACH FL 32550  
City/State and Zip Code

CWANDRICK21@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CHAD WANDICK at (540) 226-9197  
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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

SALVADOR ALDAMA

\_\_\_\_\_  
Name of Registered Agent

Registered Agent for TRIGGER CONSTRUCTION LLC

\_\_\_\_\_  
Name of Limited Liability Company

L23000486700

\_\_\_\_\_  
Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

  
\_\_\_\_\_  
Signature of Resigning Agent

If signing on behalf of an entity:

CHAD WANDRICK

\_\_\_\_\_  
Typed or Printed Name

REGISTERED AGENT

\_\_\_\_\_  
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**

FILED  
2024 AUG -9 PM 3:45  
STATE OF FLORIDA  
DIVISION OF CORPORATIONS