L23000510335

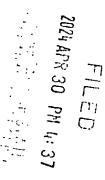
(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
	MAX	40pm
	5	HORNE ARE
		

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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Top Notch A/C Services L	LC
Name of Limited Liability	Company
DOCUMENT NUMBER: L23000510335	
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:	
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 provision	ons of section 605.0115, Florida Statutes, the unde	rsigned.
United States Corp	poration Agents, Inc.	, hereby resigns as
Name of Registered Agent		. Hereby resigns as
Registered Agent for \underline{T}	op Notch A/C Services LLC	
	Name of Limited Liability Company	·,
L23000510335		
Document N	umber, if known	
	on was mailed to the above listed limited liability and the office discontinued on the 31st day after	
	Signature of Resigning Agent	
If signing on behalf of a	an entity:	
Cheyenne Moseley		
	Typed or Printed Name	
	Asst. Secretary for United States Corporation Agr	ents, 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