

10/14/21, 1:07 PM

Division of Corporations

# NO 500002448

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (614)280-3338  
Fax Number : (954)208-0845

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

## LLC REGISTERED AGENT RESIGNATION SNELLING EMPLOYMENT, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$85.00

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STATE OF FLORIDA  
TALLAHASSEE, FLORIDA2021 OCT 14 PM 3:10  
SECRETARY OF STATE  
TALLAHASSEE, FL

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OCT 15 2021

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

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

C T CORPORATION SYSTEM

Name of Registered Agent

, hereby resigns as

Registered Agent for

SNELLING EMPLOYMENT, LLC

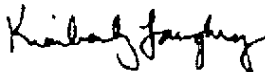
Name of Limited Liability Company

M05000002448

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:

Kimberly Laughrey

Typed or Printed Name

Assistant Secretary

Capacity

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TALLAHASSEE, FL

### 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\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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