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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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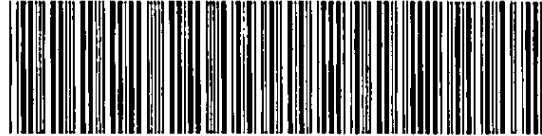
(Business Entity Name)

(Document Number)

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D. SCOTT  
OCT 2 2017

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: The Andrews Law Firm, LLC  
(Name of Corporation)

DOCUMENT NUMBER: \_\_\_\_\_

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sonja Andrews  
(Name of Person)

The Andrews Law Firm, LLC  
(Name of Firm/Company)

3421 Dogwood Dr  
(Address)

Hapeville, GA 30354  
(City/State and Zip Code)

For further information concerning this matter, please call:

Sonja Andrews at ( 770 ) 968 7380  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Mailing Address:**  
Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

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

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

**Incorp Services, Inc.**, hereby resigns as registered agent for **The Andrews Law Firm, LLC**.

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 31<sup>st</sup> day after the date on which the statement is filed.

Ashley Hecke ON BEHALF OF INCORP SERVICES,  
Signature of Resigning Agent INC.

If signing on behalf of the entity:

Ashley Hecke ON BEHALF OF INCORP SERVICES,  
Type or Printed Name INC.

ASSISTANT Secretary  
Capacity

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