# M13000000 293

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



200339001172

01/13/20--01017--013 \*\*25.60

2020 CT 13 Fit 3: 15

R. WHITE FEB 1 0 2020

### **COVER LETTER**

RRANG	CH BUILDING GROUP LI	
SUBJECT:	Name of Limited Liability	
	M13000000293	v Company ·
DOCUMENT NUMBER:	1413000000233	
The enclosed Resignation of Refor filing.	gistered Agent for a Limited	d Liability Company and fee are submitted
Please return all correspondence	concerning this matter to t	he following:
Chelsea (	Chapman	
Name of I	Person Person	-
Legalinc Corporate	e Services, Inc.	
Name of Firm	/Company	-
10601 Clarence Dri	ve, Suite 250	
Addre	SS	-
Frisco, TX	75033	
City/State and	Zip Code	-
E-mail address: (to be used for fi	uture annual report notification)	-
For further information concern	ing this matter, please call:	
Chelsea Chapman	at (	386-0178
Name of Person	Area Code	Daytime Telephone Number
Enclosed is a check made payab liability company or \$25.00 for a liability company.		t of State for \$85.00 for an active limited d, voluntarily dissolved or withdrawn limite

### MAILING ADDRESS:

**TO:** Registration Section Division of Corporations

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

INHS17 (2/14)

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

Pursuant to the provision	ons of section 605.011	5, Florida Statutes, the undersigned.		
Legalinc Corporate	Services, Inc.	, hereby resigns as		
	Name of Registered Age			
Registered Agent for _	BRANCH	BUILDING GROUP LLC		
	Name of Lim	ited Liability Company	·	
M1300	00000293			
Document N	umber, if known	<del></del>		
A copy of this resignati	on was mailed to the a	bove listed limited liability company at its last known a	ddress.	
The agency is terminate	ed and the office disco	ntinued on the 31st day after the date on which this state	ment is fil	led.
		Signature of Resigning Agent		
If signing on behalf of a				
Chelsea Chapman		202		
Typed or Printed Name		2020 J::: 13		
on Behalf of Legalinc Corporate Services, Inc.		. : :		
		Capacity	$\overline{\omega}$	
			2	
			بب	ئ
	FILING \$ 85.00 \$ 25.00	FEES: Active limited liability company Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company	<del></del>	

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314