# Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations |

Fax Number

: (850)617-6383

From:

Account Name

: INCORP SERVICES INC

Account Number: I20120000007

: (702)866-2500

Fax Number

: (702)866-2689

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

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## LLC REGISTERED AGENT RESIGNATION EXPRESSBAGGER, LLC

Certificate of Status	0
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Page Count	03
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**S Warren** 

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#### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: EXPRESSBAGGER, LLC	
Nume of Limited Liabilit	y Company
DOCUMENT NUMBER: M13000003810	
The enclosed Resignation of Registered Agent for a Limite for filing.	d Liability Company and fee are submitted
Please return all correspondence concerning this matter to t	he following:
Wendy Hefley	•
Name of Person	-
Incorp Services, Inc.	
Name of Firm/Company	-
3773 Howard Hughes Parkway, Suite 500S	
Address	-
Las Vegas, NV 89169-6014	
City/State and Zip Code	-
processing@incorp.com	
E-mail address: (to be used for future annual report notification)	-
For further information concerning this matter, please call:	
Incorp Services, Inc./Wendy Hefley 702	866-2500 ext 6601
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 Tallahussee, 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	as of section 605.0115, Florida Statutes, the under	rsignea,	
Incorp Services, In	c.	, hereby resigns as	
	Name of Registered Agent	,	
Registered Agent for	·		
EXPRESSBAGGE	R, LLC		
	Name of Limited Liability Company	<u> </u>	
M13000003810			
Document Nu	mber, if known		
A copy of this resignation	on was mailed to the above listed limited liability	company at its last known address.	
The agency is terminate	d and the office discontinued on the 31st day after	r the date on which this statement is i	iled.
	WerdT		
	Signature of Resigning Agent		ı
If signing on behalf of a	n entity:	Y 产品 注	<b>!</b> *
	Wendy Hefley for Incorp Services, Inc.	ANTASST ANTA O	•
	Typed or Printed Name		1
	Authorized Representative		7
	Capacity	ST &	
		42	

### 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