

7/7/2020

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : RICHARDS & ASSOCIATES, PA.
Account Number : I28110000091
Phone : (305)858-9900
Fax Number : (305)285-0015

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

Email Address: _____

**REGISTERED AGENT RESIGNATION
MRO GROUP LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$87.50

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JUL 08 2020

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MRO GROUP LLC

Name of Limited Liability Company

DOCUMENT NUMBER: M14000002001

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DARLIN ESPINOSA

Name of Person

RICHARDS & PARTNERS PA

Name of Firm/Company

2665 S BAYSHORE DRIVE STE 703

Address

MIAMI, FL 33133

City/State and Zip Code

DESPINOSA@RICHARDS-LAW.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DARLIN ESPINOSA

at (305) 858-9900

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2020 JUL -7 AM 10:07

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

WORLD CORPORATE SERVICES, INC.

, hereby resigns as

Name of Registered Agent

Registered Agent for MRO GROUP LLC

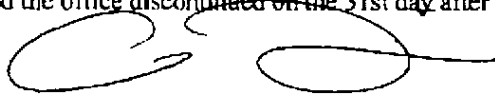
Name of Limited Liability Company

M14000002001

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:

GWENDOLYN RICHARDS

Typed or Printed Name

DIRECTOR

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