M17000005392

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CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO.	:	12000000	0195			
	REFERENCE	:	412681	8323810			
	AUTHORIZATION	:	Louelle	Lenan			
	COST LIMIT	:	\$ (25.00				
ORDER DATE :	January 18, 2022	i.					
ORDER TIME :	9:07 AM						
ORDER NO. :	412681-075						
CUSTOMER NO:	8323810						
CHANGE OF AGENT							

NAME: TBM ENERGY SERVICE, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CONTACT PERSON: Matthew Todd

EXAMINER'S INITIALS:

COVER LETTER

SUBJECT: Name of Limited Liability	Company
DOCUMENT NUMBER: M17000005392	
The enclosed Resignation of Registered Agent for a Limiter for filing.	d Liability Company and fee are submitted
Please return all correspondence concerning this matter to t	he following:
RESIGNATIONS DEPARTMENT	
Name of Person	-
CORPORATION SERVICE COMPANY	
Name of Firm/Company	-
251 LITTLE FALLS DRIVE	
Address	-
WILMINGTON, DE 19808	
City/State and Zip Code	-
ANNUALREPORTS@CSCGLOBAL.COM	
E-mail address: (to be used for future annual report notification)	-
For further information concerning this matter, please call:	
RESIGNATION DEPT 800	927-9801
Name of Person at (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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Registration Section Division of Corporations

TO:

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ons of section 605.0115, Florida Statutes	, the undersigned,	
CORPORATION SERVICE COMPANY		, hereby resigns as	
	Name of Registered Agent		
Registered Agent for _	BM ENERGY SERVICES, LLC		-
	Name of Limited Liability Compar	ny	.•
M17000005392			
Document N	lumber, if known		
		d liability company at its last known address. It day after the date on which this statement is used to be a statement of the date.	
If signing on behalf of	an entity: BY ALEXXIS WEILAND	2022 APR 20 SECK TALLARY	
	Typed or Printed Name ASSISTANT VICE PRESIDENT Capacity	ίη· —	

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, F1. 32314

\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company