M18000005113

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





300374376103

10/04/21--01032--023 **170.00

2021 OCT -4 PM12: 09

COVER LETTER ;

SUBJECT: America II Electronics, LLC					
Name of Limited Liability Company					
DOCUMENT NUMBER: M18000005111					
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:					
Robyn Selby					
Name of Person					
America II Group, LLC					
Name of Firm/Company					
2500 118th Ave N					
Address					
St. Petersburg, FL 33716					
City/State and Zip Code					
corp-tax@a2globalelectronics.com					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Robyn Selby at (800)767-2637					
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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 provisions of section 605.0115.	Florida Statutes, the unde	rsigned.		
Michael Pointer		, hereby resigns as		
Name of Registered Agent				
Registered Agent for 21st Century Electronics, L	LC	-		
Name of Limite	d Liability Company	<u>.</u>		·
M18000005113				
Document Number, if known	_			
A copy of this resignation was mailed to the abo	ove listed limited liability	company at its last kn	iown address.	
The agency is terminated and the office disconti	inued on the 31st day afte Land January Grant Francisco Control of Resigning Agent	r the date on which th	is statement is	s filed.
<u> </u>	charlonted Name Several Capacity	(ourse)	2021 OCT -4 PH 12: 09 SEGRE WEB 25 (15) 1	
FILING F \$ 85.00 \$ 25.00	EES: Active limited liability of Administratively dissolve withdrawn limited liabili	≥d/ vofuntarily dissolv	ved/	

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

INHS17 (2/14)