## P23000023015

(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:	
Special instructions to rining Officer.	

Office Use Only



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## **COVER LETTER**

Division of Corporations
SUBJECT: McElligott Holdings Inc.
(Name of Corporation)  DOCUMENT NUMBER: P23000023015
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
United States Corporation Agents, Inc.
(Name of Person)
Legalzoom.com, Inc.
(Name of Firm/Company)
9900 Spectrum Dr.
(Address)
Austin, TX 78717
(City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person)  at (800 ) 773-0888  (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation as \$35.00 for an administrative dissolved, voluntarily dissolved or withdrawn corporation as \$35.00 for an administrative dissolved, voluntarily dissolved or withdrawn corporation as \$35.00 for an active corporation and \$35.00 for activ
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

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Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, United States Corporation Agents, Inc.
(Name of Registered Agent)
hereby resigns as Registered Agent for McElligott Holdings Inc.
(Number Corporation)
P23000023015
(Document Number, if known)
A copy of this resignation was mailed to the above listed corporation 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.
CU
(Signature of Resigning Agent)
If signing on behalf of an entity:
Cheyenne Moseley
(Typed or Printed Name)
Asst. Secretary for United States Corporation Agents, Inc.
(Capacity)
Fee for filing this document:
\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/
withdrawn corporation

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