117000213493

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COVER LETTER

TO: Registration Section Division of Corporations SUBJECT: Big Wave Lacrosse, LLC

Name of Limited Liability Company DOCUMENT NUMBER: L17000213493 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: United States Corporation Agents, Inc. Name of Person Legalzoom.com, Inc. Name of Firm/Company 101 North Brand Blvd. 11th Floor Address Glendale, CA 91203 City/State and Zip Code raresignations@legalzoom.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Jazmine Johnson Name of Person 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited

MAILING ADDRESS:

liability company.

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provis	ions of section 605.0115, Florida Statutes, the unc	dersigned,		
United States Corporation Agents, Inc.		_ , hereby resigns as		
	Name of Registered Agent			
Registered Agent for	Big Wave Lacrosse, LLC	.		_
	Name of Limited Liability Company			<u>-</u> ,
L17000213493				
Document	Number, if known			
A copy of this resigna	tion was mailed to the above listed limited liabilit	y company at its last known	address	S.
The agency is termina	ited and the office discontinued on the 31st day af	ter the date on which this sta	tement	is filed.
	Signature of Resigning Agent	SECRE	2020 AUG -4	В
If signing on behalf of an entity:			ਨੂ	energy energy energy energy
	Cheyenne Moseley	TARY OF AHASSE		m
	Typed or Printed Name	SE SE	=	115
	Asst. Secretary for United States Corporation A	Agents, Inc.	AM 10: 54	\
	Capacity		5	

FILING FEES:

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\$ 25.00 Administratively dissolved/ withdrawn limited liability company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