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SECRETARY OF STATE
FALL ABASSIES FLORIDA

TECHNOLDER

## **COVER LETTER**

	of Limited Liabil	ty Company	
DOCUMENT NUMBER: L190000713	344 		
The enclosed Resignation of Registered . for filing.	Agent for a Limit	ed Liability Company and fee are sub	mitted
Please return all correspondence concern	ing this matter to	the following:	
United States Corporation Agents, In	nc.		
Name of Person		_	
Legalzoom.com, Inc.			
Name of Firm/Company	·	<u></u>	
101 North Brand Blvd. 11th Floor			
Address		<del></del>	
Glendale, CA 91203			
City/State and Zip Code	<u> </u>	_	
raresignations@legalzoom.com			
E-mail address: (to be used for future annua	d report notification	<del></del>	
For further information concerning this n	natter, please call	:	
Janna Pantoja	800	773-0888 x3950	
Name of Person	Area Coc	773-0888 x3950 le Daytime Telephone Number	

## MAILING ADDRESS:

TO: Registration Section Division of Corporations

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 provision	ons of section 605.0115, Florida Statutes, the t	undersigned,		
United States Corp	poration Agents, Inc.	, hereby resigns as		
	Name of Registered Agent	Hereby resigns as	igns as	
Registered Agent for	ACME Advertising Werx LLC			
	N. St. Commission	<del></del>		
	Name of Limited Liability Company			
L19000071344				
Document N	umber, if known			
A copy of this resignati	on was mailed to the above listed limited liab	ility company at its last k	nown addre	SS.
The agency is terminate  If signing on behalf of a	Signature of Resigning Ag		<b>20</b> SE: 'AL'	
	Cheyenne Moseley		温温し	
	Typed or Printed Name		: 12 - <b>co</b> -	
	Asst. Secretary for United States Corporation  Capacity	Agents, Inc.		Ď
		(D)	AMII: OL	
	FILING FEES: \$ 85.00 Active limited liabilit \$ 25.00 Administratively diss withdrawn limited lia	y company olved/ voluntarily dissol ibility company	ved/	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)