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COVER LETTER

TO: Registration Section Division of Corporations	•	
'		
MTL INVESTMENTS SUBJECT:	, LLC	
30031.01	Name of Limited Liability Company	
DOCUMENT NUMBER: L03000	031938	
The enclosed Resignation of Regist for filing.	ered Agent for a Limited Liability Company and fee are submitted	
Please return all correspondence con	ncerning this matter to the following:	
Krystal Beckner		
Name of Perso	n	
COGENCY GLOBAL INC.		
Name of Firm/Cor	npany	
850 New Burton Rd., Suite 20	1	
Address		
Dover, DE 19904		
City/State and Zip	Code	
E-mail address; (to be used for future	annual report notification)	
For further information concerning	this matter, please call:	
Invoices Team	0//	
Name of Person	at (<u>866</u>) <u>621-3524</u> Area Code Daytime Telephone Number	
Enclosed is a check made payable to liability company or \$25.00 for an a liability company.	o the Florida Department of State for \$85.00 for an active limited idministratively dissolved, voluntarily dissolved or withdrawn limited	
MAILING ADDRESS:	STREET ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provi	sions of section 605.0115, Florida Statutes,	the undersigned.	
COGENCY GLO	BAL INC.	, hereby resigns as	
	Name of Registered Agent	; nevery resigns us	
Registered Agent for	MTL INVESTMENTS, LLC		
	Name of Limited Liability Company	<u>y</u>	
L03000031938			
Documen	Number, if known		
A copy of this resign	ation was mailed to the above listed limited	Hiability company at its last known address.	
The agency is termin	ated and the office discontinued on the 31st Krystal Beck Signature of Resignin	t day after the date on which this statement is Ener ng Agent	filed.
If signing on behalf o	of an entity:	>	
	Krystal Beckner		
	Typed or Printed Name Assistant Secretary, COGENCY	Y GLOBAL INC.	
	Capacity FILING FEES: \$ 85.00 Active limited lises 25.00 Active lines 2	1:55 (1:10)	

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

withdrawn limited liability company