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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: GG Events Management, LLC		
Name of Limited Liability Company		
DOCUMENT NUMBER: L09000088055		

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:

Nathan Rogut		
Name of Person		
GG Events Management		
Name of Firm/Company		
1740 Richard Petty Blvd.		
Address		

Daytona Beach, FL 32114

City/State and Zip Code

nathan@ggeventsllc.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Shannon Koch	at (940) 391-9987
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

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

STREET ADDRESS:

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

RESIGNATION OF REGISTERED AGENT FOR A LIMITED **LIABILITY COMPANY**

Pursuant to the provision	s of section 608.416(2) or 608.509, Florida Stat	tutes, the undersigned,
Shannon Koch		_ , hereby resigns as
	Name of Registered Agent	_ , notoby rosigns as
Registered Agent for G	G Events Management, LLC	
	Name of Limited Liability Company	,
L09000088055		
Document Nur	nber, if known	
A copy of this resignation	n was mailed to the above listed limited liability	y company at its last known address.
The agency is terminated	and the office discontinued on the dist day after	er the date on which this statement is filed.
	Signature of Resigning Agent	
If signing on behalf of an	entity:	APR 19 PM
•	Typed or Printed Name	
	Capacity	PH 5: 02

FILING FEES:

\$ 85.00 Active limited liability company

\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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