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Office Use Only



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SECRETARY OF STATE

Ja 10/06/20

COVER LETTER

Registration Section Division of Corporations

TO:

Global Nomads CCD, LLC SUBJECT:_ Name of Limited Liability Company DOCUMENT NUMBER: L13000044828 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company. STREET ADDRESS: MAILING ADDRESS: Registration Section Registration Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ns of section 605.011	5, Florida Statutes, the under	rsigned.			
United States Corporation Agents, Inc.			, hereby resigns as	:		
	Name of Registered Ager	nt	, nereby resigns as			
Registered Agent for $\frac{G}{}$	lobal Nomads CC	D, LLC				_
	Name of Lim	ited Liability Company				.
L13000044828						
Document Nu	mber, if known					
A copy of this resignation	on was mailed to the a	above listed limited liability of	company at its last	t known a	ıddress	
The agency is terminate	d and the office disco	ntinued on the 31st day after	the date on which	n this state	ement	is filed.
		00.4				
		Signature of Resigning Agent				
		organization of recongraining regions				
If signing on behalf of a	n entity;					
	Cheyenne Moseley					
	Typed or Printed Name					
	Asst. Secretary for U	Inited States Corporation Age	ents, Inc.			
		Capacity				
	DH ING	rnne				
	\$ 85.00 \$ 25.00	Active limited liability co Administratively dissolve withdrawn limited liabili	d/ voluntarily dis:	超 算	2020 AUG 18	
	Make checks paval	ole to Florida Department of S	State and mail to:	33	8	CHARGE OF THE PARTY OF T
	•	Division of Corporations P.O. Box 6327		RETARY OF	A	П

Tallahassee, FL 32314