

L140000031389

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: World Impact Group, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L14000031389

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:

John Stewart

Name of Person

World Impact Group, LLC

Name of Firm/Company

3030 N. Rocky Point Drive, Suite 408

Address

Tampa, FL 33607

City/State and Zip Code

jjs3030@gmail.com

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

For further information concerning this matter, please call:

John Stewart

Name of Person

at 813 769-2424

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

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 provisions of section 605.0115, Florida Statutes, the undersigned,

Ryan Krupnick

Name of Registered Agent

Registered Agent for World Impact Group, LLC

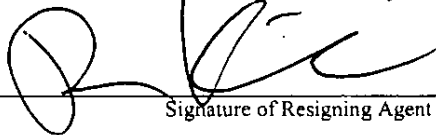
Name of Limited Liability Company

L14000031389

Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.



Signature of Resigning Agent

If signing on behalf of an entity:

RYAN KRUPNICK

Typed or Printed Name

AMBR

Capacity

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withdrawn limited liability company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

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