L14000082916

(Requestor's Name)			
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SECRETARY OF STATE

COVER LETTER

SUBJECT: YDA, LLC		
	Liability Company	
DOCUMENT NUMBER: L14000080916		
The enclosed Resignation of Registered Agent for a for filing.	Limited Liability Company and fee are submitted	
Please return all correspondence concerning this ma	tter to the following:	
United States Committion Agents, Inc.		
Name of Person		
Legalzoom.com, Inc.		
Name of Firm/Compa		
9900 Spectrum Dr.		
Address		
Austin, TX 78717		
City/State and Zip Co .		
raresignations@lc_mlzoom.com		
E-mail address: (to be used for future ann. al report notifi	cation)	
For further information concerning this matter, pleas	se call:	
31 (80	0 773-0888 ea Code Daytime Telephone Number	
Nan: 'erson Ard	ca Code Daytime Telephone Number	
Enclosed is a check made payable to the Florida Depliability company of \$\int_{0}25.00\$ for an admit stratively cliability company.	partment of State for \$85.00 for an active limited lissolved, voluntarily dissolved or withdrawn limited	
MAILING ADDRESS:	STREET ADDRESS:	
Registration Section	Registration Section	
Division of Corpor. These	Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

TO: Registration Section Division of Corporations

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the proviso-	s of section 605.01	🚉 Florida Statutes, the undersig	gned.
United States Corp	oration Agents,	· C.	ereby resigns as
	Same of Registered Aga		ereny realghs ha
Registered Agent for $\frac{Y}{}$	DA, LLC		
	Name of 1	red Liability Company	·
L14000082916 Document N	er, if known		
A copy of this resignat'	was mailed to the	Nove listed limited liability coa	mpany at its last known address.
The agency is termina:	and the office dis	ntinued on the 31st day after th	ne date on which this statement is filed.
	·	Signature of Resigning Agent	
If signing on behalf of:	· emily;		ACCRE II
	Cheyenne Mo:	ley	影が竹
	Anst. Secretary for	yped or Printed Name miled States Corporation Agen	ts, Inc.
		Capacity	
	FILIN' \$ 85.0° \$ 25.0	*EES; Active limited liability com Administratively dissolved/ withdrawn limited liability	vofuntarily dissolved/

Make checks per the to Florida Department of State and mail to:

P.O. Box 6327 Tallahassee, FL 32314