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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Vital Docs LLC	
Name of Limited Liability	Company
DOCUMENT NUMBER: L14000172090	
The enclosed Resignation of Registered Agent for a Limited for filing.	Liability Company and fee are submitted
Please return all correspondence concerning this matter to the	e 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:	
800 at (773-0888 x395
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

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 provision:	s of section 605.0115, Florida Statutes, the unders	signed.
United States Corpo	ration Agents, Inc.	hereby resigns as
 	Name of Registered Agent	
Registered Agent for Vit	al Docs LLC	
	Name of Limited Liability Company	·
L14000172090		
Document Nur	nber, if known	
A copy of this resignation	n was mailed to the above listed limited liability c	ompany at its last known address.
The agency is terminated	and the office discontinued on the 31st day after Signature of Resigning Agent	the date on which this statement is filed.
If signing on behalf of an	entity:	(U) 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Cheyenne Moseley	
	Typed or Printed Name	
	Asst. Secretary for United States Corporation Age	
	Capacity	dD 500

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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