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(Address)		
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COVER LETTER

SUBJECT: Royal Mayo Games LLC Name of		
Name of	Limited Liability	Company
DOCUMENT NUMBER: L14000176114	4	
The enclosed Resignation of Registered Agreef filing.	ent for a Limited	Liability Company and fee are submitted
Please return all correspondence concerning	g this matter to th	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 re-	eport notification)	
For further information concerning this mat	tter, please call:	
Janna Pantoja	800	773-0888 x3950
Name of Person	Area Code	773-0888 x3950)
Enclosed is a check made payable to the Flo liability company or \$25.00 for an administ liability company.	orida Department ratively dissolved	of State for \$85.00 for an active limited d. voluntarily dissolved or withdrawn limited

MAILING ADDRESS:

TO: Registration Section Division of Corporations

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 provisi-	ons of section 605.0115, Florida Statutes, the under	signed.
United States Corporation Agents, Inc.		hereby resigns as
	Name of Registered Agent	nereo, reagna da
Registered Agent for _	Royal Mayo Games LLC	
	Name of Limited Liability Company	
L14000176114		
Document S	łumber, if known	
A copy of this resignat	ion was mailed to the above listed limited liability c	company at its last known address.
The agency is terminat	ed and the office discontinued on the 31st day after	the date on which this statement is filed.
	Signature of Resigning Agent	2020 APR 20
If signing on behalf of	an entity:	æ
	Cheyenne Moseley	ي الله الله الله الله الله الله الله الل
	Typed or Printed Name	
	Asst. Secretary for United States Corporation Age	ents, Inc.
	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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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