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## **COVER LETTER**

TO:	Registration Section Division of Corporations
SUB.	JECT: Amelia Properties, LLC  Name of Limited Liability Company
DOC	CUMENT NUMBER: L15000097742
The c	enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted ling.
Pleas	se return all correspondence concerning this matter to the following:
Unit	ed States Corporation Agents, Inc.
	Name of Person
Lega	alzoom.com, Inc.
-	Name of Firm/Company
990	0 Spectrum Dr.
	Address
Aus	tin, TX 78717
	City/State and Zip Code
rare	signations@legalzoom.com
	E-mail address: (to be used for future annual report notification)
For f	further information concerning this matter, please call:
	Name of Person Area Code Daytime Telephone Number
	Name of Person Area Code Daytime Telephone Number
Encl liabi liabi	losed is a check made payable to the Florida Department of State for \$85.00 for an active limited lity company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limite lity company.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

INHS17 (2/14)

## STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ns of section 605.0115, Florida Statutes, the unde	ersigned.		
United States Corp	oration Agents, Inc.	, hereby resigns as		
	Name of Registered Agent	. Hereby resigns as		72
Registered Agent for Amelia Properties, LLC			<u></u>	14.150g
			-: -:-	<del></del>
	Name of Limited Liability Company		<u> </u>	
L15000097742			_	:
Document Nu	ember, if known			60%
	on was mailed to the above listed limited liability d and the office discontinued on the 31st day after the Signature of Resigning Agent			
If signing on behalf of a	n entity:			
	Cheyenne Moseley			
	Typed or Printed Name			
	Asst. Secretary for United States Corporation Ag	gents, Inc.		
	Capacity			

Make checks payable to Florida Department of State and mail to: **Division of Corporations** 

FILING FEES:
\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

P.O. Box 6327 Tallahassee, FL 32314