L15000 176273

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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COVER LETTER

TO: Reg Div	istration Section ision of Corporations		
SUBJECT	MHB TECHNOLOGY CO	NSULTANTS, LL	С
.,01,01,01	Name	of Limited Liability	Company
DOCUME	NT NUMBER: L150001762	273	
The enclose for filing.	ed Resignation of Registered .	Agent for a Limited	Liability Company and fee are submitted
Please retu	rn all correspondence concern	ing this matter to th	ne following:
United Sta	ates Corporation Agents, In	C.	
	Name of Person		
LegalZoo	m.com, Inc.		
	Name of Firm/Company	,	
101 North	Brand Blvd. 11th Floor		
	Address	-	
Glendale,	CA 91203		
	City/State and Zip Code	:	
raresigna	tions@legalzoom.com		
E-mail	address: (to be used for future annua	l report notification)	
For further	information concerning this n	natter, please call:	
Joyce Yi		800	773-0888 x7789
 	Name of Person	Area Code	773-0888 x7789 Daytime Telephone Number

MAILING ADDRESS:

liability company.

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314

STREET ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

FILED

STATEMENT OF RESIGNATION OF REGIST PRED &GENT FOR A LIMITED LIABILITY COMPANY OF STATE TALLAHASSEE, FL

Pursuant to the provisi	ons of section 605.0115. Florida Statutes, the under	signed.
United States Cor	poration Agents, Inc.	, hereby resigns as
	Name of Registered Agent	
Registered Agent for 1	MHB TECHNOLOGY CONSULTANTS, LL	.C
	Name of Limited Liability Company	· · · · · · · · · · · · · · · · · · ·
L15000176273		
Document 8	Sumber, 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 34st day after	the date on which this statement is filed.
	Signature of Resigning Agent	
If signing on behalf of	an entity:	
	Cheyenne Moseley	
	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\$ 85.00 Active limited liability company \$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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