# 15000205597

(	Requestor's Name)			
	Address)			
(	Address)			
(	City/State/Zip/Phone #)	<del></del> -		
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**

SUBJECT: AGILE IT SYSTEMS & SO	of Limited Liabilit	y Company	
DOCUMENT NUMBER: L150002055	597		
The enclosed Resignation of Registered A for filing.	Agent for a Limite	ed Liability Company and fee are	submitted
Please return all correspondence concerni	ing this matter to	the following:	
United States Corporation Agents, In	C.		
Name of Person	<u> </u>	_	
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 annua	report notification)	_	
For further information concerning this m	natter, please call:		
Janna Pantoja	800	773-0888 x3950	
Name of Person	Area Code	773-0888 x3950 Daytime Telephone Number	

### 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 Clitton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

Pursuant to the provisio	ns of section 605.0115, Florida Statu	tes, the undersigned.			
United States Corporation Agents, Inc.		hereby rosi	, hereby resigns as		
	Name of Registered Agent	-	. Hereby resigns as		
Registered Agent for $\frac{A}{}$	GILE IT SYSTEMS & SOLUTI	ONS, LLC			
			1	_	
	Name of Limited Liability Com	pany		<u> </u>	
L15000205597					
Document No	mber, if known				
A copy of this resignation	on was mailed to the above listed lim	ited liability company at	its last known addres	ss.	
The agency is terminate	d and the office discontinued on the	31st day after the date on	which this statemen	t is filed.	
	Signature of Res	igning Agent	SE FALL		
lf signing on behalf of a	n entity:		JAN CRE LAS AHASS	.77	
	Cheyenne Moseley		45.85 9-	,	
	Typed or Printed Na		200 American	m	
	Asst. Secretary for United States Corporation Age		Wilder in Straight of the Stra	D	
	Capacity		9.00 1.00 1.00 1.00 1.00 1.00 1.00 1.00		
			ad ;		
	\$ 25.00 Administrativ	d liability company vely dissolved/ voluntari mited liability company	ly dissolved/		

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314