h16000008111

(Requestor's Name)
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SECRETARY OF STATE
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COVER LETTER

SUBJECT: DLoLo Design, LLC	
Name of Limited Liability	Company
DOCUMENT NUMBER: L16000008111	
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	
9900 Spectrum Dr.	
Address	
Austin, TX 78717	
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:	
at (773-0888
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

INHS17 (2/14)

TO:

Registration Section Division of Corporations

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ons of section 605.0115. Florida Statutes, the	e undersigned,			
United States Corporation Agents, Inc.		, hereby resigns as			
	Name of Registered Agent	; nereby reargina us	S	202	
Registered Agent for DLoLo D)LoLo Design, LLC		CRE	2022 APR	77
			HAS.	□ 13	
	Name of Limited Liability Company		- 第六 - 9		Ī
L16000008111			10 m	AH 10: 15	
Document N	umber, if known			ហ	
A copy of this resignati	on was mailed to the above listed limited lia	ability company at its last l	cnown add	dress.	
The agency is terminate	ed and the office discontinued on the 31st da	y after the date on which t	this staten	nent is	filed.
	Signature of Resigning /	Agent			
If signing on behalf of a	an entity:				
	Cheyenne Moseley				
	Typed or Printed Name				
	Asst. Secretary for United States Corporati	ion Agents, Inc.			
	Capacity				

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\$25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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