11600000 8134

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SECRETARY OF STATE
TALLAHASSEE, FL

Ja 10/06/20

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:___ Name of Limited Liability Company DOCUMENT NUMBER: L16000008134 The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing. Please return all correspondence concerning this matter to the 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 report notification) For further information concerning this matter, please call: Jazmine Johnson Name of Person 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company. STREET ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

INHS17 (2/14)

P.O. Box 6327

Tallahassee, FL 32314

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisio	ns of section 605.0115, Flor	rida Statutes, the under	signed.
United States Corporation Agents, Inc.			. hereby resigns as
	Name of Registered Agent		
Registered Agent for	itsera, LLC		
	Name of Limited Lia	ability Company	
L16000008134			
Document Nu	ımber, if known		
A copy of this resignation	on was mailed to the above	listed limited liability o	company at its last known address.
The agency is terminate	d and the office discontinue	ed on the 31st day after	the date on which this statement is filed.
		ture of Resigning Agent	
	Signa	nuie of Kesigning Agent	
If signing on behalf of a	n entity:		
	Cheyenne Moseley		
	Typed or	Printed Name	
	Asst. Secretary for United	States Corporation Age	ents, Inc.
	Сар	pacity	

Make checks payable to Florida Department of State and mail to: **Division of Corporations** P.O. Box 6327

Active limited liability company
Administratively dissolved/ voluntarily dissolved/

withdrawn limited liability company

FILING FEES:

\$ 85.00 \$ 25.00

Tallahassee, FL 32314