# L160000 67282

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### **COVER LETTER**

TO:	Registration Section Division of Corporations
SUB.	JEMGRASS, LLC JECT:  Name of Limited Liability Company
	Thanke C. I Million of Company
DOC	UMENT NUMBER: L16000067282
The e for fi	enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted ling.
Pleas	e return all correspondence concerning this matter to the following:
Unite	ed States Corporation Agents, Inc.
	Name of Person
Lega	alzoom.com, Inc.
	Name of Firm/Company
9900	) Spectrum Dr.
	Address
Aust	tin, TX 78717
	City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For f	urther information concerning this matter, please call:
Kas	andra Lund at ( 1 800 773-0888 x3951 Area Code Daytime Telephone Number
	Name of Person Area Code Daytime Telephone Number
liabil	osed 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for \$85.00 for an active limited lity company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limit lity company.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

TO:

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

Pursuant to the provision	ns of section 605.0115. Florida Statu	ites, the undersigned,			
United States Corp	oration Agents, Inc.	hereby resigns a	IS		
	Name of Registered Agent				
Registered Agent for U	EMGRASS, LLC				
	Name of Limited Liability Cor	npany			
L16000067282					
Document Nu	amber, if known				
A copy of this resignation	on was mailed to the above listed lin	nited liability company at its la	st known addre	288.	
The agency is terminate	ed and the office discontinued on the		4°	nt is file 2019 APR 22	d.
It signing on behalf of a	in entity:		ALLAHASSEE!	APR	
	Cheyenne Moseley		77.20	22	محصورة محصورة
	Typed or Printed N	lame	(7, * (7) *		i Prima
	Asst. Secretary for United States C	Corporation Agents, Inc.	$m_{ij}$	PH	
	Capacity		严.	ت کن ﴿(	

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

\$ 85.00 \$ 25.00

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

withdrawn limited liability company