# 116000071107

(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:		

Office Use Only



800335952348

10/25/19--01013--004 \*\*25.00

RA Resignation

### **COVER LETTER**

**TO:** Registration Section Division of Corporations

SUBJECT: OFFSUIT GAMING, LLC	
Name of Limited Liability Company	
DOCUMENT NUMBER: L16000071107	
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:	3
<u>Kasandra Lund</u> at (1800 ) 773-0888 x3951	المستريخ المستريخ الشي الشي
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 liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withd limited liability company.	e limited in larawni i

### 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

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

Pursuant to the provisi	ons of section 605.0115, Florida Statutes, the undersigne	u.
United States Corporation Agents, Inc.		, hereby resigns as
	Name of Registered Agent	. , ,
Registered Agent for _	OFFSUIT GAMING, LLC	
	Name of Limited Liability Company	·
L16000071107		
Document S	fumber, if known	
	tion was mailed to the above listed limited liability comp	
The agency is terminate	ed and the office discontinued on the 31st day after the date	on which this statement is thed.
If signing on behalf of an entity:		
	Cheyenne Moseley	
	Typed or Printed Name	
	Asst. Secretary for United States Corporation Agents, Inc.	o. 🔀 📆
	Capacity	S

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

withdrawn limited liability company