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### **COVER LETTER**

то:	Registration Section Division of Corporations		
SUBJE	ECT: Black Suit Music, LLC		
	Name o	of Limited Liabilit	y Company
DOCU	MENT NUMBER: <u>L1600007477</u>	<del>′</del> 3	
The end or filin	closed Resignation of Registered Ag	gent for a Limite	d Liability Company and fee are submitted
Please i	return all correspondence concernin	g this matter to	the following:
United	States Corporation Agents, Inc		
	Name of Person		_
Legalz	zoom.com, Inc.		
	Name of Firm/Company		_
101 N	orth Brand Blvd. 11th Floor		
	Address		_
Glend	ale, CA 91203		
·	City/State and Zip Code		<del>_</del>
raresiç	gnations@legalzoom.com		
E-r	nail address: (to be used for future annual	report notification)	_
For fur	ther information concerning this ma	itter, please call:	
Jazmii	ne Johnson	800	773-0888 x5122 Daytime Telephone Number
	Name of Person	ar (Area Cod	Daytime Telephone Number

#### MAILING ADDRESS:

liability company.

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 provision	ons of section 605.011:	5, Florida Statutes, the under	signed.			
United States Corporation Agents, Inc.			hereby resigns as	hy resions as		
	Thereby Testignian					
Registered Agent for _	Black Suit Music, L	LC				-
	Name of Lim	ited Liability Company			_	
L16000074773						
Document N	umber, if known	<del></del>				
A copy of this resignati	ion was mailed to the a	above listed limited liability o	rompany at its las	t known ac	ldress.	
The agency is terminate	ed and the office disco	ntinued on the 31st day after	the date on which	n this state	ment i	s med.
		0111				
		Signature of Resigning Agent				
If signing on behalf of:	an entity:					
	Cheyenne Mose	alev				
		'yped or Printed Name		10	2(	
	Asst. Secretary for United States Corporation Age		ents, Inc.		120 /	
		Capacity		41. 43.	2020 AUG -4	3 6
				HA	1	rums
				3SS 40,	7	
	<u>FILING</u> \$ 85.00	FEES:	impany	E.S.	<u> </u>	
	\$ 25.00	Active limited liability co Administratively dissolve withdrawn limited liability	d/ voluntarily dis ty company	Solweg Chi	AM 10: 58	

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