1600069489

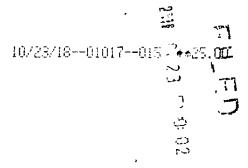
(Requestor's Name)
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(Dunings Satity Name)
(Business Entity Name)
(Document Number)
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COVER LETTER

SUBJECT:).		_	
DOCUMENT NUMBER: L1600008948	of Limited Liability	Company		
DOCUMENT NUMBER:			_	
The enclosed Resignation of Registered A for filing.	gent for a Limited	Heability Company and fee a	re subm	itted
Please return all correspondence concernit	ng this matter to th	ne following:		
United States Corporation Agents, Inc) .			
Name of Person		-		
Legalzoom.com, Inc.			F-12	
Name of Firm/Company		-	,	
9900 Spectrum Dr.				1
Address		-	,	
Austin, TX 78717		,	ງ: 02	
City/State and Zip Code		-		
		_		
E-mail address: (to be used for future annual	report notification)			
For further information concerning this ma	atter, please call:			
Janna Pantoja	1 800	773-0888 x3950 Daytime Telephone Number		
Name of Person	Area Code	Daytime Telephone Number	_	
Enclosed is a check made payable to the F liability company or \$25.00 for an administrability company.	Torida Departmen stratively dissolve	at of State for \$85.00 for an ac ad, voluntarily dissolved or wi	tive lim thdrawr	ited Himited

MAILING ADDRESS:

Registration Section Division of Corporations

TO:

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

United States Co	rporation Agents, Inc. hereby	resigns as
	Name of Registered Agent	
Registered Agent for	Jerkovich Consulting, L.L.C.	
	Name o Limited Liability Company	
L16000089489		
Document	Number, if known	
		- F-9
	ation was mailed to the above listed limited liability companated and the office discontinued on the 31st day after the dat Signature of Resigning Agent	y at its last known address. e on which this statement is filed
	ated and the office discontinued on the 31st day after the dat Signature of Resigning Agent	y at its last known address. e on which this statement is filed
The agency is termina	ated and the office discontinued on the 31st day after the dat Signature of Resigning Agent	y at its last known address. e on which this statement is filed
The agency is termina	ated and the office discontinued on the 31st day after the dat Signature of Resigning Agent f an entity:	y at its last known address. e on which this statement is filed
The agency is termina	Signature of Resigning Agent Cheyenne Moseley	y at its last known address. e on which this statement is filed 2

FILING FEES:
\$ 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