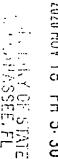
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| (Requestor's Name)                          |
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| PICK-UP WAIT MAIL                           |
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| (Business Entity Name)                      |
| (Daving A Markey)                           |
| (Document Number)                           |
| Certified Copies Certificates of Status     |
|   |
| Special Instructions to Filing Officer:     |
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#### **COVER LETTER**

SUBJECT: TLH Marketing, LLC Name of Limited Liability Company DOCUMENT NUMBER: L16000149392 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:

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

#### MAILING ADDRESS:

TO: Registration Section

Division of Corporations

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 605,0115,                     | Florida Statutes, the unders   | igned,          |            |                      |              |
|---|--|--|-----------------|------------|----------------------|--------------|
| United States Corporation Agents, Inc.  |  |  | hereby regions  | ne         |                      |              |
| ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | Name of Registered Agent . hereby resigns as |  |                 |            |                      |              |
| Registered Agent for                    | LH Marketing, LLC                            |  |                 | *          |                      | ·            |
|   | Name of Limite                               | ed Liability Company   |                 |            |                      |              |
| L16000149392                            |  |  |                 |            |                      |              |
| Document N                              | umber, if known                              | <del></del>  |                 |            |                      |              |
| A copy of this resignati                | on was mailed to the ab                      | ove listed limited liability ec  | ompany at its L | ast know   | n addr               | ess.         |
| The agency is terminate                 | ed and the office discont                    | inued on the 31st day after t  | he date on wh   | ich this s | tateme               | nt is filed. |
|   |  | Signature of Resigning Agent   |                 |            |                      |              |
| If signing on behalf of;                | nn entity;                                   |  |                 |            | <u>~2</u>            |              |
|   | Cheyenne Moseley                             |  |                 | <u> </u>   | 2020 HOV 18 PM 5: 30 |              |
|   | Тур  | ed or Printed Name   |                 |            | ÷.                   | •            |
|   | Asst. Secretary for Un                       | ited States Corporation Ager   | its, Inc.       |            | 8                    | <br>:        |
|   |  | Capacity   |                 |            | P                    | 1            |
|   |  |  |                 | 17 cs      | رن<br>ب              |              |
|   | EH ING E                                     | PTO  |                 |            | ä                    |              |
|   | FILING F<br>\$ 85.00<br>\$ 25.00             | <u>F.F.S:</u><br>Active limited liability com<br>Administratively dissolved<br>withdrawn limited liability | /vofuntarily d  | issolved/  | _                    |              |

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

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