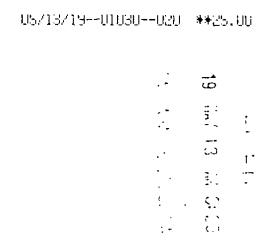
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MAY 2 8 2019 S. YOUNG

## COVER LETTER

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TO: Registration So Division of Co	ection prporations	
SUBJECT: Ohana L	anguage School, Ll	LC .
		Limited Liability Company
DOCUMENT NUMI	BER: L1600015404	9 <del> </del>
The enclosed Resigna for filing.	l tion of Registered Ag   	ent for a Limited Liability Company and fee are submitted
Please return all corre	 spondence concerning 	this matter to the following:
United States Corpo	 pration Agents, Inc.	
	Name of Person	<u>.                                    </u>
Legalzoom.com, Ind	<u> </u> С.	
Nar	ne of Firm/Company	
9900 Spectrum Dr.		
	Address	
Austin, TX 78717		
Cit	y/State and Zip Code	
E-mail address: (to b	e used for future annual re	eport notification)
For further informatic	 on concerning this mat	ļ ņer. please call:
	_	1 800 773-0888 x395
Name	of Person	Area Code Daytime Telephone Number
Enclosed is a check n liability company or \$ liability company.	l gade payable to the Flo \$25.00 for an administ	orida Department of State for \$85.00 for an active limited tratively dissolved, voluntarily dissolved or withdrawn limited
MAILING ADDRES Registration Section Division of Corporati P.O. Box 6327 Tallahassee, FL 3231	ons 	STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
INHS17 (2/14)		

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

		. Florida Statutes, the undersigned	d,		
United States Corpo		i, neret	oy resigns as		
	Name of Registered Agen	I			
Registered Agent for Of	nana Language S	chool, LLC			
	Name of Limi	ted Liability Company			·
L16000154049					
Document Nui	iber, if known	<del>-</del>			
A copy of this resignation	n was mailed to the al	 	ny at its last know	n addi	ress.
,	•	ntinued on the 31st day after the day			
	$\Lambda$ ,	A A	are on which (113 3	titicino	in is med
		Signature of Resigning Agent			19
If signing on behalf of an	entity;			-	;-1·
·	Cheyenne Mosel	ev <sub>i</sub>		•	
	· · · · · · · · · · · · · · · · · · ·	ped or Printed Name		-	(J)
	Asst. Secretary for U	nited States Corporation Agents, Ir	nc.	ı	
		Capacity	<del></del>		ස ය)
		!		<b>;</b> *	$\hookrightarrow$
	FILING ) \$ 85.00 \$ 25.00	FEES: Active limited liability company Administratively dissolved/ vol- withdrawn limited liability con	untarily dissolved	<i>(</i>	
	Make cheeks payabi	e to Florida Department of State at Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314	nd mail to:		
INHS17 (2/14)					