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(Address)			
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COVER LETTER

TO: Registration Section Division of Corporations
'
SUBJECT: Arend Investments, LLC Name of Limited Liability Company
Name of Limited Liability Company
DOCUMENT NUMBER: L16000223123
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
9900 Spectrum Dr.
Address
Austin, TX 78717
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:
Name of Person at (800) 773-0888 Area Code Daytime Telephone Number
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

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 unc	dersigned.	
United States Corporation Agents, Inc.		_ , hereby resigns as	
	Name of Registered Agent	_ :	
Registered Agent for _	Arend Investments, LLÇ		_
	Name of Limited Liability Company		•
L16000223123			
Document N	lumber, if known		
A copy of this resignati	ion was mailed to the above listed limited liabilit	y company at its last known address	s.
The agency is terminate	ed and the office discontinued on the 31st day af	ter the date on which this statement	is filed.
	Signature of Resigning Agent		
If signing on behalf of an entity:		SECRETAR TALLAHA)))
	Cheyenne Moseley	L A	<
	Typed or Printed Name	Agents, Inc.	- I
	Asst. Secretary for United States Corporation A	Agonto Inc.	
	Capacity		န် 🔘 သ

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FEES: \$ 85.00 Active \$ 25.00 Admi Active limited liability company Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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