

(Requestor's Name)						
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COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJ	Dixie Crane, LLC		_		
	Name		ted Liability	Company	
DOC	UMENT NUMBER: L17000020	784			
The c for fil	nclosed Resignation of Registered ing.	Agent fo	or a Limited	Liability Company and fee are submitted	
Please	e return all correspondence concern	ing this	matter to th	e following:	
Unite	ed States Corporation Agents, Ir	ic.			
	Name of Person				
Lega	ilzoom.com, Inc.				
	Name of Firm/Company	V	·		
101	North Brand Blvd. 11th Floor				
	Address	-			
Glen	dale, CA 91203				
	City/State and Zip Code	2			
rares	signations@legalzoom.com				
E	E-mail address: (to be used for future annu	al report i	notification)		
For fi	erther information concerning this	natter. p	olease call:		
Jann	na Pantoja	_ at	,800	773-0888 x3950	
	Name of Person	at	Area Code	Daytime Telephone Number	
liabil	osed is a check made payable to the ity company or \$25.00 for an admitive company.	Florida iistrativ	Departmen ely dissolve	t of State for \$85.00 for an active limited d, voluntarily dissolved or withdrawn limited	
MAI	LING ADDRESS:		STREI	ET ADDRESS:	
Regis	Registration Section Registra			ation Section	
	ion of Corporations	on of Corporations			
	Box 6327	Building			
Talla	hassee, FL 32314	xecutive Center Circle			

Tallahassee, FL 32301

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions	s of section 605.0115	. Florida Statutes, the undersig	ned,				
United States Corpo	ration Agents, Inc	, hereby resigns as					
Name of Registered Agent							
Registered Agent for Div	kie Crane, LLC			_			
	Name of Limi	ted Liability Company		 ·			
L17000020784							
Document Nur	nber, if known						
A copy of this resignation	n was mailed to the a	bove listed limited liability cor	npany at its last known ac	ldress.			
The agency is terminated	and the office discor	Signature of Resigning Agent	e date on which this state	ment is filed			
If signing on behalf of ar	entity:						
	Cheyenne Moseley						
	Typed or Printed Name						
	Asst. Secretary for United States Corporation Agents, Inc.						
		Capacity					
	FILING \$ 85.00 \$ 25.00	FEES: Active limited liability com Administratively dissolved/ withdrawn limited liability	voluntarily dissolved/	ું મું ()			

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