## L17000034455

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## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Uber, LLC	ne of Limited Liability	Company
	•	Company
DOCUMENT NUMBER: L1700003	1400	
The enclosed Resignation of Registered for filing.	d Agent for a Limited	l Liability Company and fee are submitted
Please return all correspondence conce	rning this matter to th	ne following:
Chelsea Haire		
Name of Person		•
Legalinc Corporate Services, Inc.		
Name of Firm/Compa	ny	•
10601 Clarence Drive, Suite 250		
Address		-
Frisco, TX 75033		
City/State and Zip Co	de	•
E-mail address: (to be used for future ann	ual report notification)	-
For further information concerning this	matter, please call:	
Chelsea Haire	844	<b>386-0178</b>
Name of Person	Area Code	Daytime Telephone Number
Enclosed is a check made payable to th liability company or \$25.00 for an adm liability company.	e Florida Departmen inistratively dissolve	t of State for \$85.00 for an active limited d, voluntarily dissolved or withdrawn limited
MAILING ADDRESS:		ET ADDRESS:
Registration Section	-	ation Section
Division of Corporations P.O. Box 6327		n of Corporations Building
Tallahassee, FL 32314		xecutive Center Circle
•		ssee, FL 32301

INHS17 (2/14)

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

Pursuant to the provisions of section 605.011	15, Florida Statutes, the	: undersigned,	
Legalinc Corporate Services, Inc.		, hereby resigns as	
Name of Registered Age	ent	, , , , , , , , , , , , , , , , , , , ,	
Registered Agent for Uber, LLC			
Name of Lir	mited Liability Company		,
L17000034455			
Document Number, if known			
A copy of this resignation was mailed to the			
The agency is terminated and the office disco	ontinued on the 31st day  Signature of Resigning A		
If signing on behalf of an entity:		金属 る	
	Chelsea Haire	SER SER	-
1	Typed or Printed Name		
	Secretary		t the
	Capacity		
		<b>*</b>	•

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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