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#### **COVER LETTER**

USA Real Estates Homes II, LLC SUBJECT:	
Name of Limited Liability	Company
DOCUMENT NUMBER: L17000053338	<u> </u>
The enclosed Resignation of Registered Agent for a Limited for filing.	d Liability Company and fee are submitted
Please return all correspondence concerning this matter to the	he following:
Brandy O'Dell	
Name of Person	-
KKOS Lawyers	
Name of Firm/Company	-
1883 W Royal Hunte Dr. Suite 200	
Address	
Cedar City, UT 84720	
City/State and Zip Code	
brandy@kkoslawyers.com	
E-mail address: (to be used for future annual report notification)	-
For further information concerning this matter, please call:	
Brandy O'Dell 435	586-9366
Name of Person 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Registration Section Division of Corporations

TO:

#### **Street Address:**

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

Pursuant to the prov	visions of section 605.0115, Florida Statutes, the u	indersigned.
Registered Agent So	lutions, Inc.	, hereby resigns as
	Name of Registered Agent	; Hereby resigns as
Registered Agent fo	USA Real Estate Homes II, LLC	
	Name of Limited Liability Company	·
L17000053338		
Docume	nt Number, if known	
A copy of this resig	nation was mailed to the above listed limited liabi	lity company at its last known address.
The agency is termi	nated and the office discontinued on the 31st day	after the date on which this statement is fik
If signing on behalf	of an entity:	ent
ψ ψ	Jacqueline Wright	- Land
	Typed or Printed Name	
	VP of Client Operations	温
	Capacity	2:1:

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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