L17000 100303

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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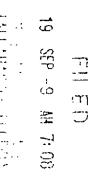
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SEP 1 8 2019 S. YOUNG



COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: DJScates Entertainment, LLC	
Name of Limited Liabilit	y Company
DOCUMENT NUMBER: L17000100303	
The enclosed Resignation of Registered Agent for a Limite for filing.	d Liability Company and fee are submitted
Please return all correspondence concerning this matter to t	he following:
United States Corporation Agents, Inc.	
Name of Person	_
Legalzoom.com, Inc.	
Name of Firm/Company	-
101 North Brand Blvd. 11th Floor	
Address	-
Glendale, CA 91203	
City/State and Zip Code	-
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Janna Pantoja 1 800	773-0888 x3950
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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 provisi	ons of section 605,01	15. Florida Statutes, the unde	rsigned.			
United States Corporation Agents, Inc. Name of Registered Agent			, hereby resigns as			
			_ thereby resigns as			
Registered Agent for _	OJScates Entertai	nment, LLC				
	Nume of Li	mited Liability Company				
	istanc of the	mice traininy Company				
L17000100303						
Document S	Sumber, if known					
A copy of this resignat	ion was mailed to the	above listed limited liability	company at its last l	known ad	dress.	
The agency is terminat	ed and the office disc	ontinued on the 31st day after	the date on which:	this staten	nent is	filed.
		Signature of Resigning Agent				
If signing on behalf of	an entity:					
	Cheyenne Mos	eley				
		Typed or Printed Name			ō	
	Asst. Secretary for	United States Corporation Age	ents, Inc.	ALL A	£	7)
		Capacity		•••		 1
					<u>C</u>	17.7
	<u>FILING</u> \$ 85.00	FEES: Active limited liability co	mpany	1.0%	MI 7: 08	·
	\$ 25.00	Active limited liability co Administratively dissolve withdrawn limited liabilit	d/voluntarily disso y company	lved/를	ξ.	

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