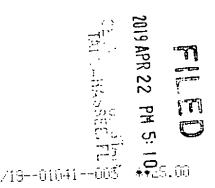
L17000 104997

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TO:	Registration Section Division of Corporations	सिमंदि प्रत स्रोतेः
	CLICK4STUFF, LLC ECT: Name of Limited Liabili	ty Company
DOC	UMENT NUMBER: L17000104997	
The er for fili	nclosed Resignation of Registered Agent for a Limiting.	ed Liability Company and fee are submitted
Please	return all correspondence concerning this matter to	the following:
Unite	d States Corporation Agents, Inc.	
	Name of Person	_
Legal	Izoom.com, Inc.	
	Name of Firm/Company	_
9900	Spectrum Dr.	
	Address	
Austir	n, TX 78717	
	City/State and Zip Code	_
E-	mail address: (to be used for future annual report notification)	_
For fur	rther information concerning this matter, please call:	
Kasaı	ndra Lund 1 800	773-0888 x3951
	Name of Person Area Cod	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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 undersigned,			
United States Corp	, hereby resigns as	horoby rocione as			
	Name of Registered Agent	, nerecy resigns as			
Registered Agent for	CLICK4STUFF, LLC				
	Name of Limited Liability Compar	iy		<u> </u>	
L17000104997					
Document N	umber, if known				
	on was mailed to the above listed limited				
The agency is terminate	ed and the office discontinued on the 31s	t day after the date on which thi	s statemer	at <u>is</u> tile	rd.
	ed and the office discontinued on the 31s	ng Agent	TALLARIANCE	019 APR 22	
If signing on behalf of an entity:			54-	70	m
	Cheyenne Moseley		m. M	PH 5:	O
	Typed or Printed Name			-0	
	Asst. Secretary for United States Corpo	pration Agents, Inc.	רז	0	

Capacity

FILING FEES: \$ 85.00 Active limited liability company \$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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