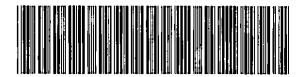
# L17000127961

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### COVER LETTER

Registration Section Division of Corporations SUBJECT: Inglis Mangum Consulting, LLC Name of Limited Liability Company DOCUMENT NUMBER: L17000127961 The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing. Please return all correspondence concerning this matter to the 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 raresignations@legalzoom.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Janna Pantoja Name of Person 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

TO:

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

Pursuant to the provisions of secti	on 605.0115,	Florida Statutes, the und	lersigned.			
United States Corporation Agents, Inc.				ve		
	egistered Agent		_ , hereby resigns a	15		
Registered Agent for Inglis Mar	ngum Cons	ulting, LLC	<del></del>			
	Name of Limite	ed Liability Company				
L17000127961						
Document Number, if kno	own	<u> </u>				
A copy of this resignation was ma	iled to the abo	ove listed limited liability	y company at its las	st known addre	SS.	
The agency is terminated and the o	$\mathcal{L}$	inued on the 31st day aft		th this statemer	n is filed	d.
If signing on behalf of an entity:						
Cheyenne Moseley					20	
	Тур	ed or Printed Name			2020 JUL	
Asst. Sec	cretary for Uni	ited States Corporation A	gents, Inc.		=	•
		Capacity			9-	٠
	FILING F \$ 85.00 \$ 25.00	EES: Active limited liability of Administratively dissolv withdrawn limited liabi	ved/ voluntarily dis	ssolved/	PM 3: 34	. ! -

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