117000136870

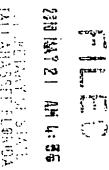
(Requestor's Name)
(Address)
(Address)
. (Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(business Emily Nume)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600313421936

05/21/18--01043--027 **85.00



HAY 23 20th J. HARRIS

COVER LETTER

SUBJECT: VIRGILIOS PHOTOGRA	ne of Limited Liab	ility Company	
DOCUMENT NUMBER: L17000136			
The enclosed Resignation of Registered for filing.	l Agent for a Lim	ited Liability Company and fee ar	e submittec
Please return all correspondence concer	ming this matter t	o the following:	
Joyce Yi			
Name of Person			
LegalZoom.com, Inc.			
Name of Firm/Compar	ı'n.		
101 N. Brand Blvd, Fl. 11			
Address	· · · ·		
Glendale, CA 91203			
City/State and Zip Cod	le		
E-mail address: (to be used for future annu	ual report notification	1)	
For further information concerning this	matter, please ca	II:	
Joyce Yi	323	962-8600 x7789	
Name of Person	''' \ Area Co	de Daytime Telephone Number	

MAILING ADDRESS:

liability company.

TO: Registration Section Division of Corporations

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 provisions of section 605.0115	, Florida Statutes, the undersi	gned.			
United States Corporation Agents, Inc.		. hereby resigns as			
Name of Registered Agent					
Registered Agent for VIRGILIOS PHOTO	GRAPHY, LLC				
Name of Limit	ed Liability Company				, .
L17000136870					
Document Number, if known					
A copy of this resignation was mailed to the ab	ove fisted limited liability co	mpany at its last I	enown ac	ldress.	
The agency is terminated and the office discon	tinued on the 31st day after th	ne date on which (this state	ment is	s tiled.
	My Signature of Resigning Agent				
If signing on behalf of an entity:	Signature of Kesigning Agent		<u> </u>	2318	
Cheyenne Moseley			25/35	12 J.F.1 HEG	-
Typed or Printed Name			HASSEE.	€ 2	CENTER OF THE PERSON NAMED IN COLUMN TWO IN
Asst. Secretary on behalf of United States Corporation Agents, Inc.			77 77		ا بمرد ه د
Capacity		 _	~;~. ∰ (o)		\$ 2 ; 19-w -
			TLORIDA	四十. 86	,
FILING					
\$ 85.00 \$ 25.00	Active limited liability com Administratively dissolved/ withdrawn limited liability	voluntarily disse	lved/		

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