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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: GH Max, LLC			
	limited Liability Con	npany	
DOCUMENT NUMBER: L17000147178			
The enclosed Resignation of Registered Age for filing.	nt for a Limited Lia	bility Company and fee are submitted	
Please return all correspondence concerning	this matter to the fo	llowing:	
United States Corporation Agents, Inc.			
Name of Person			
Legalzoom.com, Inc.			
Name of Firm/Company		8	
9900 Spectrum Dr.		PIL PIL	
Address	· · · · · · · · · · · · · · · · · · ·	m e (m)	
Austin, TX 78717		PH D	
City/State and Zip Code		FILED B OCT 19 PH 6: 49 ALLAHASSEE, FLORIDA	
E-mail address: (to be used for future annual rep	ort notification)		
For further information concerning this matte	r, please call:		
Janna Pantoja	1 800 773	3-0888 x3950	
Name of Person	Area Code Day	etime Telephone Number	
Enclosed is a check made payable to the Flor liability company or \$25.00 for an administraliability company.	ida Department of S tively dissolved, vo	tate for \$85.00 for an active limited luntarily dissolved or withdrawn limited	
MAILING ADDRESS:	STREET A	DDRESS:	
Registration Section Division of Corporations	Registration Section		
P.O. Box 6327	Division of Corporations Clifton Building		
Tallahassee, FL 32314	2661 Executive Center Circle		

Tallahassee, FL 32301

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisio	ns of section 605.0115, Florida Statutes, the unde	rsigned.		
United States Corporation Agents, Inc. , hereby resigns as				
	Name of Registered Agent	thereby realigns an		
Registered Agent for G	H Max, LLC			
	Name of Limited Liability Company		,	
L17000147178				
Document Ni	imber, if known			
A copy of this resignation	on was mailed to the above listed limited liability	company at its last known addre	ss.	
The agency is terminate	d and the office discontinued on the 31st day after	r the date on which this statemer	nt is fi	led.
	CM			
	Signature of Resigning Agent		$\vec{\varpi}$	
If signing on behalf of a	n entity:		000	-77
	Cheyenne Moseley	ASS.	61 1	=
	Typed or Printed Name	<u>र्</u>		
	Asst. Secretary for United States Corporation Ag	ents, Inc.		J
	Capacity	ents, Inc.	6: 49	

FILING FEES:

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Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company \$ 85.00 \$ 25.00

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