L17000226981

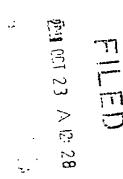
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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: MDM FUNDS, LLC Name of Limited	Liability (Company
DOCUMENT NUMBER: L17000226987	Lidomty	
The enclosed Resignation of Registered Agent for a for filing.	Limited	Liability Company and fee are submitted
Please return all correspondence concerning this ma	atter to the	e following:
United States Corporation Agents, Inc.		
Name of Person		
Legalzoom.com, Inc.) proj.
Name of Firm/Company		31 -
9900 Spectrum Dr.		
Address		> 5
Austin, TX 78717		₹ 2
City/State and Zip Code		<u> </u>
E-mail address: (to be used for future annual report not	ification)	
For further information concerning this matter, ple	ase call:	
Kasandra Lund 1	800	773-0888 x 3951
Name of Person at (Area Code	Daytime Telephone Number
Enclosed is a check made payable to the Florida D liability company or \$25.00 for an administratively liability company.	epartmen dissolve	t of State for \$85.00 for an active limited d. voluntarily dissolved or withdrawn lim
MAILING ADDRESS:	STREE	ET ADDRESS:
Registration Section	Registration Section	
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building	
Tallahassee, F1, 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

INHS17 (2/14)

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ons of section 605.0115. Florida Statutes, the unde	ersigned.	
United States Corporation Agents, Inc. Name of Registered Agent		hereby resigns as	
	Name of Limited Liability Company	,	
L17000226987			
Document i	Number, if known		
	tion was mailed to the above listed limited liability		
The agency is termina	signature of Resigning Agent	· *	
If signing on behalf of	an entity:	2	
Cheyenne Moseley			
	Typed or Printed Name		
	Asst. Secretary for United States Corporation A	Agents, Inc.	
	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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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