# 118000090815

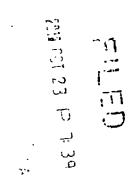
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





700319824357

10/23/18--01017--015 \*#25.00



October 12, 2018

Florida Department of State Division of Corporations P.O. BOX 6327 Tallahassee, FL 32314

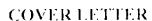
### To Whom It May Concern:

This is to inform you that enclosed is a resignation of United States Corporation Agents, Inc. ("USCA") as registered agent for the following entity:

STEPHEN TIPTON PHOTOGRAPHY, LLC ZENERGY CAPITAL INC. TWO K'S REAL ESTATE INVESTMENTS, LLC TACTICAL RADICAL ESCAPE GAMES, LLC ISTANBUL IMPORTS, LLC PANTHER AQUATIC CLUB, LLC RUFFLES AND ROSES LLC GLOBAL OLIVE TREE LLC BEACH SHORE INVESTMENTS LLC EXOTIC WILDLIFE PUBLISHING LLC GROAK, LLC R. S. COLE, LLC RELIANCE LEGAL NURSE CONSULTING, LLC TRICK YOUR BOAT, LLC

Please note that USCA is a wholly-owned subsidiary of LegalZoom.com, Inc.

Sincerely, Kasandra Lund 1-800-773-0888 x 3951 klund@legalzoom.com LegalZoom Registered Agent Team



TO: Registration Section Division of Corporations

TACTICAL RADICAL ESCA SUBJECT:				
Name of	Limited Liability	Company		
DOCUMENT NUMBER: L18000090815				
The enclosed Resignation of Registered Agric filing.	ent for a Limited	Liability Company and	d fee are subt	nitted
Please return all correspondence concerning	g this matter to th	e following:		
United States Corporation Agents, Inc.				
Name of Person				
Legalzoom.com. Inc.				
Name of Firm/Company		•	· · · (° a · · · ·	- ; 4
9900 Spectrum Dr.			3	
Address			23	; = 1
Austin, TX 78717			7	.,
City/State and Zip Code			ى <sub>پ</sub> ىن ھ	
E-mail address, (to be used for future annual re-	eport notification)			
For further information concerning this mat	tter, please call:			
Kasandra Lund	1 800	773-0888 x 3951		
Name of Person	Area Code	Daytime Telephone Nu	umber	

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

<u>.</u> <u>.</u> .	pration Agents, Inc.	, hereby resigns as
	Name of Registered Agent	
Registered Agent for TA	ACTICAL RADICAL ESCAPE GAMES	3. LLC
<u>.</u>	Name of Limited Liability Company	KJ
	wing the minimal confidence	4 3
L18000090815		() w
Document Nun	nber, if known	
A copy of this resignation	n was mailed to the above listed limited liabili	ity company at its last known address.
The agency is terminated	and the office discontinued on the 31st day at	ther the date on which this statement is filed
	Synature of Resigning Agen	<del></del>
It'signing on behali' of an		n: -
It signing on behalf of an		nt -
It signing on behalf of an	rentity:	n: -
	Cheyenne Moseley	

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

FILING FEES: \$ 85.00 Active limited liability company

Administratively dissolved/voluntarily dissolved/

withdrawn limited liability company

\$ 25,00