L18000098704

(Re	questor's Name)
(Ad	ldress)	
(Ad	idress)	
() 10	101035)	
(Cit	ty/State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
/P.	ısiness Entity Na	
(Bu	isiness Enuty Na	me)
(Do	ocument Number	7)
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COVER LETTER

Division of Corporations		4
SUBJECT: PRO VIBEZ RECO	RDING STUDIO, LLC	
	Name of Limited Liabili	y Company
DOCUMENT NUMBER: L180	00098704	
The enclosed Resignation of Regifor filing.	istered Agent for a Limite	ed Liability Company and fee are submitted
Please return all correspondence of	concerning this matter to	the following:
United States Corporation Age	ents, Inc.	
Name of Per	rson	
LegalZoom.com, Inc.		
Name of Firm/C	Company	_
101 North Brand Blvd. 11th Flo	oor	
Address	·	_
Glendale, CA 91203		
City/State and Z	ip Code	
raresignations@legalzoom.com	m	
E-mail address: (to be used for futu	re annual report notification)	_
For further information concerning	g this matter, please call;	
Joyce Yi	ar (773-0888 x7789
Name of Person	Area Code	Daytime Telephone Number

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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, Ft. 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 provision	ons of section 605.011	5. Florida Statutes, the unde	ersigned.			
United States Corporation Agents. Inc.		IC.	, hereby resigns as			
	Name of Registered Agent					
Registered Agent for P	RO VIBEZ RECO	RDING STUDIO, LLC				
	Name of Lim	ited Liability Company				
L18000098704						
Document N	umber, if known					
A copy of this resignati	on was mailed to the a	above listed limited liability	company at its last k	enown add	ress.	
It signing on behalt of a		ntinued on the 31st day after the Signature of Resigning Agent				
	Cheyenne Mose	ley				
		yped or Printed Name				
	Asst. Secretary for L	United States Corporation Ag	jents. Inc.			
	FILING \$ 85.00 \$ 25.00 Make checks payal	Capacity FEES: Active limited liability of Administratively dissolve withdrawn limited liabile to Florida Department of	red/voluntarily disso lity company	S. CREIKERY OF STATE	2020 SEP 28 AM 9: 44	
	٠.	Division of Corporations		171	+	

P.O. Box 6327 Tallahassee, FL 32314