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(Requestor's Name)	_
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(Business Entity Name)	_
(Document Number)	_
Certified Copies Certificates of Status	_
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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Styling4Writers, LLC		
Name	of Limited Liability	Company
DOCUMENT NUMBER: L180001016	89	
The enclosed Resignation of Registered A for filing.	rgent for a Limited	Liability Company and fee are submitted
Please return all correspondence concerni	ng this matter to th	e following:
United States Corporation Agents, Inc	C.	
Name of Person		
Legalzoom.com, Inc.		
Name of Firm/Company		
101 North Brand Blvd. 11th Floor		
Address		
Glendale, CA 91203		
City/State and Zip Code		
raresignations@legalzoom.com		
E-mail address: (to be used for future annua	l report notification)	•
For further information concerning this n	natter, please call:	
Janna Pantoja	800	773-0888 x3950 Daytime Telephone Number
Name of Person	Area Code	Daytime Telephone Number
Enclosed is a check made payable to the liability company or \$25.00 for an admin liability company.	Florida Departmen istratively dissolve	t of State for \$85.00 for an active limited d. voluntarily dissolved or withdrawn limited

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

Pursuant to the provisio	ns of section 605.0115, Florida Statutes, the unders	signed,	
United States Corp	oration Agents, Inc.	hereby resigns as	
	Name of Registered Agent		
Registered Agent for S	tyling4Writers, LLC		
	Name of Limited Liability Company	<u> </u>	
L18000101689			
Document N	umber, if known		
A copy of this resignation	on was mailed to the above listed limited liability c	ompany at its last known address.	
The agency is terminate	ed and the office discontinued on the 31st day after	the date on which this statement is	i filed.
	Signature of Resigning Agent		9.000 a
If signing on behalf of a	on entity:		3 22
	Cheyenne Moseley	0.5	
	Typed or Printed Name		7.80
	Asst. Secretary for United States Corporation Age	ents, Inc.	erita Pringe
	Capacity		· . .

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