# L18000144607

Office Use Only



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#### **COVER LETTER**

TO:	Registration Section Division of Corporations		•			
	;	•	*			
SUBJ	ECT: EXCELSIORK9 LLC					
	Name of Lit	nited Liability	v Company			
DOC	UMENT NUMBER: <u>L18000144607</u>					
	nclosed Resignation of Registered Agent teed for filing.	for a Limite	d Liability Company and fee are			
Please return all correspondence concerning this matter to the following:						
Unite	ed States Corporation Agents, Inc.					
	Name of Person		-			
Lega	lzoom.com, Inc.					
	Name of Firm/Company		_			
101	North Brand Blvd. 11th Floor					
	Address		_			
Glen	dale, CA 91203					
	City/State and Zip Code		_			
raresi	gnations@legalzoom.com					
19	-mail address: (to be used for future annual repor	1 notification)	_			
For fi	arther information concerning this matter.	please call:				
Kasar	ndra Lund a	ıt ( 1 800	) 773-0888 x3951			
	Name of Person	Area Code	Daytime Telephone Number			
liabili	sed is a check made payable to the Floric ty company or \$25.00 for an administrati d liability company.		nt of State for \$85.00 for an active limited ed. voluntarily dissolved or withdrawn			

## 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	ins of section 605.0115.	, Florida Statutes, the undersign	ned.
United States Corp	oration Agents, Inc.		, hereby resigns as
	Name of Registered Agent	<del></del>	
Registered Agent for	EXCELSIORK9 LLC		
	Name of Limite	ed Liability Company	·
EXCELSIORK9 LLC	ımber, if known	800014	4607
		saya ligtad limitad lighility gam	many at its last known address
A copy of this resignati	on was maned to the at	love fisted finited hability com	pany at its last known address.
The agency is terminated	l and the office discontin	nued on the 31st day after the dat	e on which this statement is filed.
		Signature of Resigning Agent	
If signing on behalf of a	an entity:		. `
	Cheyenne Mosele	¢y	•
	Турс	ed or Printed Name	Managagangaya
	Asst. Secretary for Uni	ited States Corporation Agents, I	nc.
		Capacity	·
			[ -  
	FILING F	FFC.	
	\$ 85.00	Active limited liability compan Administratively dissolved/ vol withdrawn limited liability ec	untarily dissolved/

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