## L18000150386

(Re	equestor's Name)		
(Ac	ddress)	-	
(Ac	ddress)	-	
(Ci	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	usiness Entity Nar	ne)	
(Dx	ocument Number)		
rtified Copies	_ Certificates	s of Status	
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SECRETARY OF STATE

1212120

## **COVER LETTER**

Registration Section Division of Corporations

TO:

	of Limited Liability Company
DOCUMENT NUMBER: L180001503	86
The enclosed Resignation of Registered A for filing.	agent for a Limited Liability Company and fee are submitted
Please return all correspondence concerni	ng this matter to the following:
United States Corporation Agents, Inc	2.
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 annual	report notification)
For further information concerning this m	atter, please call:
Joyce Yi	800 773-0888 x7789
Name of Person	at () Area Code Daytime Telephone Number

STREET ADDRESS:

Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

Registration Section

INHS17 (2/14)

MAILING ADDRESS:

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Registration Section

## STATEMENT OF RESIGNATION OF REGISTER DAGENT FOR A LIMITED LIABILITY COMPANY SECRETARY OF STATE TALLAHASSEE, FL

Pursuant to the provision	ons of section 605.0115. Florida Stat	utes, the undersigned.
United States Corporation Agents, Inc.		hereby resigns as
	Name of Registered Agent	•
Registered Agent for $\frac{C}{C}$	NE DAY SOFTWORKS LLC	
	Name of Limited Liability Co	ompany
L18000150386		
Document N	umber, if known	
A copy of this resignati	on was mailed to the above listed lii	mited liability company at its last known address.
The agency is terminate	ed and the office discontinued on the	2 31st day after the date on which this statement is filed.
	Signature of Re	esigning Agent
If signing on behalf of a	an entity:	
	Cheyenne Moseley	
	Typed or Printed S	Name
	Asst. Secretary for United States 0	Dorporation Agents, Inc.

FILING FEES:

Capacity

\$ 85.00 Active limited liability company \$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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