# L18000174055

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Nar	ne)
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SECRETARY OF STATE

#### COVER LETTER

TO: Registration Section Division of Corporations	
·	
SUBJECT: alkemi RF LLC	
Name of Limited Liability	Company
DOCUMENT NUMBER: L18000174055	
The enclosed Resignation of Registered Agent for a Limited for filing.	d Liability Company and fee are submitted
Please return all correspondence concerning this matter to t	he following:
United States Corporation Agents, Inc.	
Name of Person	-
Legalzoom.com, Inc.	
Name of Firm/Company	-
9900 Spectrum Dr.	
Address	-
Austin, TX 78717	
City/State and Zip Code	-
raresignations@legalzoom.com	
E-mail address: (to be used for future annual report notification)	-
For further information concerning this matter, please call:	
800 at (	773-0888
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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, 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 provis	ions of section 605.0115, Florida Statutes, the ur	ndersigned.	
United States Corporation Agents, Inc.  Name of Registered Agent		, hereby resigns as	
		thereby resigns as	
Registered Agent for	alkemi RF LLC		_
	Name of Limited Liability Company		<b>-</b> ·
L18000174055			
Document	Number, if known		
	tion was mailed to the above listed limited liabilited and the office discontinued on the 31st day a		
The agency is termina	Signature of Resigning Ager	SECRET	FIL-
If signing on behalf of	an entity;	335C 735C 737C	9 III
	Cheyenne Moseley	700	# D
	Typed or Printed Name		6: 30
	Asst. Secretary for United States Corporation	Agents, Inc.	0

FILING FEES:

Capacity

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\$ 25.00 Administratively dissolved/ withdrawn limited liability company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