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Special Instructions to I	Filing Officer:	





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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: SELF MADE PROPERTIES LLC	
Name of Limited Liability Compa	my
DOCUMENT NUMBER: L18000238864	
The enclosed Resignation of Registered Agent for a Limited Liabi submitted for filing.	lity Company and fee ar
Please return all correspondence concerning this matter to the following	owing:
United States Corporation Agents, Inc.	
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 matter, please call:	
	0888 x3951
Name of Person Area Code Dayt	ime 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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	sions of section 605.0115. Florida Statutes, the undersig	ned,
United States Corporation Agents, Inc.		, hereby resigns as
	Name of Registered Agent	_ , ,
Registered Agent for	SELF MADE PROPERTIES LLC	
	Name of Limited Liability Company	·
L18000238864		
Document	Number, if known	
.,	ation was mailed to the above listed limited liability corrected and the office discontinued on the 31st day after the day	
	Signature of Resigning Agent	19 AUG
If signing on behalf of an entity:		ASSEE
Cheyenne Moseley		3 PM 6: 08
	Typed or Printed Name	
	Asst. Secretary for United States Corporation Agents,	Inc. (0) (1) (2) (1) (2) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1
	Capacity	co

FILING FEES:
\$ 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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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