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(Re	equestor's Name)	
(Ad	ddress)	
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(Cit	ty/State/Zip/Phone	e #)
<u></u>	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
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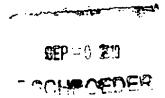
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COVER LETTER

TO: Registration Section , Division of Corporations
SUBJECT: JSR GRAPHICS LLC Name of Limited Liability Company
DOCUMENT NUMBER: L18000254353
The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
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:
~
Kasandra Lund at (1800) 773-0888 x3951 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 undersign	ed.		
United States Corporation Agents, Inc		, hereby resigns as	hereby roviens as	
		Thereby resigns us	nereoy reaigns as	
Registered Agent for_	JSR GRAPHICS LLC			
	Name of Limited Liability Company	<u> </u>		<u>_</u> .
L18000254353				
Document N	Sumber, if known			
	tion was mailed to the above listed limited liability competed and the office discontinued on the 31st day after the date			
	Signature of Resigning Agent	_		
If signing on behalf of an entity:		ASSOCIATION ASSOCI	19 AUG 28	-1788-
	Cheyenne Moseley		Š	
	Typed or Printed Name			<u> </u>
	Asst. Secretary for United States Corporation Agents. Inc.		P 1	
	Capacity	STATE TORIDA	5: 16	U

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