## 112000 266183

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## **COVER LETTER**

FO: Registration Section Division of Corporations
SUBJECT: CC Fitness Coaching LLC  Name of Limited Liability Company
Name of Limited Liability Company
DOCUMENT NUMBER: L18000266183
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:
Janna Pantoja at (800 773-0888 x3950  Name of Person Area Code Daytime Telephone Number
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

STREET ADDRESS:

Registration Section Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

INHS17 (2/14)

P.O. Box 6327

MAILING ADDRESS:

Registration Section Division of Corporations

Tallahassee, FL 32314

## STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	s of section 605.0115	. Florida Statutes, the undersig	gned.	
United States Corporation Agents, Inc.			hereby resigns as	
Name of Registered Agent			. Hereoy resigns to	
Registered Agent for $\frac{CC}{CC}$	C Fitness Coachir	g LLC		
	Name of Limi	ted Liability Company		,
L18000266183				
Document Nu	mber, if known	<del></del>		
A copy of this resignatio	n was mailed to the a	pove listed limited liability con	mpany at its last known a	ddress.
The agency is terminated	I and the office discor	Signature of Resigning Agent	ne date on which this state	ement is filed.
If signing on behalf of ar	n entity:			
	Cheyenne Mose	ey		
	T	ped or Printed Name		
	Asst. Secretary for U	nited States Corporation Agen	its, Inc.	
		Capacity		
	FILING \$ 85.00 \$ 25.00	FEES: Active limited liability com Administratively dissolved/ withdrawn limited liability	ipany / voluntarily dissolved/ company	÷

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