L18000266748

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10;	Division of Corporations		
SUB.	JECT:		
	Name of	Limited Liability	Company
DOC	UMENT NUMBER: L18000266748	3	
The e for fil		ent for a Limited	Liability Company and fee are submitted
Pleas	e return all correspondence concerning	this matter to th	e following:
Unite	ed States Corporation Agents, Inc.		
	Name of Person		
Lega	alZoom.com, Inc.		
	Name of Firm/Company		
101	North Brand Blvd. 11th Floor		
	Address		
Glen	idale, CA 91203		
	City/State and Zip Code		
rares	signations@legalzoom.com		
	E-mail address: (to be used for future annual re	port notification)	
For fi	urther information concerning this mat	ter, please call:	
Joyc	e Yi	800 at (773-0888 x7789
	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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

FILED

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

SECRETARY OF STATE TALLAHASSEE, FL

Pursuant to the provision	ons of section 605.0115. Florid	Ia Statutes, the unders	igned.
United States Corporation Agents, Inc.			. hereby resigns as
	Name of Registered Agent	·	Terre year galactur
Registered Agent for _	OBUE CAPITAL.NET LI	_C	
	Name of Limited Liab	ility Company	·
L18000266748			
Document N	umber, it known		
A copy of this resignati	on was mailed to the above lis	sted limited liability co	ompany at its last known address.
The agency is terminate		on the 31st day after t	the date on which this statement is filed.
If signing on behalf of a	an entity:		
	Cheyenne Moseley		
	Typed or P	rinted Name	_
	Asst. Secretary for United S	tates Corporation Agei	nts. Inc.
	Capac	rity	

FILING FEES: \$ 85.00 Activ \$ 25.00 Admi Active limited liability company Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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