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Office Use Only



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COVER LETTER

Registration Section Division of Corporations SUBJECT:___ Name of Limited Liability Company DOCUMENT NUMBER: L19000036119 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: Jazmine Johnson Name of Person

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

TO:

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ons of section 605.0115. Florida Statutes, the unde	ersigned,	
United States Corp	_ , hereby resigns as		
	Name of Registered Agent	Hereby reargns da	
Registered Agent for	Custom Docks & Decks DM LLC		
	Name of Limited Liability Company		·
L19000036119			
Document N	umber, if known		
A copy of this resignati	on was mailed to the above listed limited liability	company at its last known addi	ress.
The agency is terminate	ed and the office discontinued on the 31st day after	er the date on which this stateme	ent is filed
	Club Signature of Resigning Agent		707
If signing on behalf of a	on entity:		7028 NOV 1.7
	Cheyenne Moseley		
	Typed or Printed Name		e Fi
	Asst. Secretary for United States Corporation Ag	gents, Inc.	
	Capacity	FL	

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

Active limited liability company
Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

FILING FEES: \$ 85.00 Active

\$ 25.00