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## **COVER LETTER**

TO: Registration Section
Division of Corporations
SUBJECT: EXOTICGO.COM, LLC
Name of Limited Liability Company
DOCUMENT NUMBER: L19000040876
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
9900 Spectrum Dr.
Address
Austin, TX 78717
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:
at () 773-0888
Name of Person at (

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

INHS17 (2/14)

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

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned.	76
United States Corporation Agents, Inc. hereby re	signs as
Name of Registered Agent	
Registered Agent for EXOTICGO.COM, LLC	
Name of Limited Liability Company	<del></del>
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L19000040876	
Document Number, if known	
A copy of this resignation was mailed to the above listed limited liability company a	
The agency is terminated and the office discontinued on the 31st day after the date of	on which this statement is filed.
Signature of Resigning Agent	
If signing on behalf of an entity:	
Cheyenne Moseley	
Typed or Printed Name	
Asst. Secretary for United States Corporation Agents, Inc.	
Capacity	

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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