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COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJ	WYATT WHITE JR FREELA	ANCE ENTERI	PRISES LLC
	Name o	f Limited Liabilit	y Company
DOC	UMENT NUMBER: <u>L1900006063</u>	i1	
The e for fil	nclosed Resignation of Registered Aging.	gent for a Limite	d Liability Company and fee are submitted
Please	ereturn all correspondence concerning	g this matter to t	he following:
Unite	ed States Corporation Agents, Inc.		
	Name of Person		-
Lega	IZoom.com, Inc.		
_	Name of Firm/Company	-	-
101	North Brand Blvd. 11th Floor		
	Address		-
Glen	dale, CA 91203		
	City/State and Zip Code	<u> </u>	-
rares	ignations@legalzoom.com		
E	-mail address: (to be used for future annual re	eport notification)	-
For fu	rther information concerning this mat	tter, please call:	
Joyce	e Yi	800	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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provis	ions of section 605.0115, Florida Statute	s, the undersigned,			
United States Corporation Agents, Inc					
	Name of Registered Agent		a.		
Registered Agent for	WYATT WHITE JR FREELANCE	ENTERPRISES LLC		<u>_</u>	
	Name of Limited Liability Compa	uny	 -		•
L19000060631					
Document	Number, if known				
	tion was mailed to the above listed limite ted and the office discontinued on the 31 Signature of Resignature of Resignature.	st day after the date on which			: filed,
lf signing on behalf of			207		
	Cheyenne Moseley			2020 SEP	174 pt
	Typed or Printed Name	:	25		1)45747.4 42 63.3
	Asst. Secretary for United States Corp	poration Agents, Inc.	ΑΥ	28	
	Capacity FILING FEES:		OF STATE	4H II: 49	

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

\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company