# 419000090413

(Requestor's Name)
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### **COVER LETTER**

SUBJECT: Name of Limited Liability	y Company
DOCUMENT NUMBER: L19000090413	
The enclosed Resignation of Registered Agent for a Limite for filing.	d Liability Company and fee are submitted
Please return all correspondence concerning this matter to t	he 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:	
800 at (	773-0888
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

**TO:** Registration Section Division of Corporations

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 provi	sions of section 605,0115. Florida Statutes, the under	signed.	
United States Corporation Agents, Inc		hereby resigns as	
	Name of Limited Liability Company	·	
L19000090413			
Document	Number, if known		
A copy of this resigna	ation was mailed to the above listed limited liability ed	ompany at its last known address.	
	Signature of Resigning Agent	2021 JUN -	
If signing on behalf o	f an entity:		
	Cheyenne Moseley	至	
	Typed or Printed Name	<u> </u>	
	Asst. Secretary for United States Corporation Ager	nts. Inc.	
	Capacity	<del></del>	

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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