## L19000103375

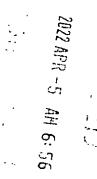
(Re	equestor's Name)			
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O SIMMON:

## **COVER LETTER**

TO: Registration Section Division of Corporations	}
·	
SUBJECT:	
Name of Limi	ted Liability Company
DOCUMENT NUMBER: L19000102375	
The enclosed Resignation of Registered Agent for filing.	or a Limited Liability Company and fee are submitted
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 n	otification)
For further information concerning this matter, p	lease call:
	800 773-0888
Name of Person at (	Area Code Daytime Telephone Number
Enclosed is a check made payable to the Florida liability company or \$25.00 for an administrative liability company.	Department of State for \$85.00 for an active limited ly dissolved, voluntarily dissolved or withdrawn limited
MAILING ADDRESS:	STREET ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building
rananassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301
	rananassee, r to 42501

INHS17 (2/14)

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

United States Corporation Agents, Inc.				
Name of Registered Agent		. hereby resigns as		
Registered Agent for John Runyon Investments LLC			2022 A	
-				<del>- 5</del>
	Name of Limi	ited Liability Company		<u>।</u> ।
L19000102375				<u> </u>
Document Number, if known			င်္ ကို	
A conv of this recignation u	ves mailed to the el	bove listed limited liability (		. 0,
			į	
The agency is terminated ar	nd the office discor	ntinued on the 31st day after	the date on which this sta	atement is filed.
		CM		
		Signature of Resigning Agent		
If signing on behalf of an en	ntity:			
C	heyenne Mosel	ley		
_	Ту	ped or Printed Name	<del>-</del> -	
As	sst. Secretary for U	nited States Corporation Age	ent <b>ș</b> , Inc.	
		Capacity		
	FILING 1 \$ 85.00 \$ 25.00	FEES: Active limited liability con Administratively dissolved withdrawn limited liabilit	mpany d/ voluntarily dissolved/ y company	
N		e to Florida Department of S	tate and mail to:	

P.O. Box 6327
Tallahassee, FL 32314

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