

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

# L1900011024

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : GUZMAN & GUZMAN, P.A.  
Account Number : I20080000090  
Phone : (305)670-1991  
Fax Number : (305)670-1993

2020 JUN -5 AM 8:41

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## LLC REGISTERED AGENT RESIGNATION MODO DOMO LLC

Certificate of Status	0
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## STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

GUZMAN & GUZMAN P.A.

Name of Registered Agent

Registered Agent for MODO DOMO LLC

Name of Limited Liability Company

L19000111024

Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

Signature of Resigning Agent

If signing on behalf of an entity:

ALBERTO GUZMAN

Typed or Printed Name

REGISTERED AGENT

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withdrawn limited liability company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