L19000129958

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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: HST STUDIOS LLC	
	Name of Limited Liability Company
DOCUMENT NUMBER: L1900	129958
The enclosed Resignation of Regis for filing.	red Agent for a Limited Liability Company and fee are submitted
Please return all correspondence co	cerning this matter to the following:
United States Corporation Ager	s, Inc.
Name of Pers	n
LegalZoom.com, Inc.	
Name of Firm/Co	pany
101 North Brand Blvd. 11th Flo	-
Address	
Glendale, CA 91203	
City/State and Zip	Code
raresignations@legalzoom.com	
E-mail address: (to be used for futur	annual report notification)
For further information concerning	his matter, please call:
Joyce Yi	at (800)773-0888 x7789 Area Code Daytime Telephone Number
Name of Person	Area Code Daytime Telephone Number

MAILING ADDRESS:

liability company.

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

FILED STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY² PH 4: 13

SECRETARY OF STATE TALLAHASSEE, FL

Pursuant to the provisions of sect	ion 605.0115. Florida Statutes, the	undersigned.
United States Corporation	Agents, Inc.	, hereby resigns as
Name of E	Registered Agent	
Registered Agent for HST STU	JDIOS LLC	
	Name of Limited Liability Company	
L19000129958		
Document Number, if kn	emu i	
		bility company at its last known address.
	Signature of Resigning 2	y after the date on which this statement is filed.
If signing on behalf of an entity:		
Cheye	enne Moseley	
·	Typed or Printed Name	
Asst. Se	ecretary for United States Corporati	on 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\$ 85.00 Active limited liability company \$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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