L19000211073

:

Office Use Only



100352863341

16/62/26--01010--014 **25.06

COVER LETTER

Name of Limited Liability	y Company
DOCUMENT NUMBER: L19000211073	
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:	
Jazmine Johnson 800	773-0888 x5122 Daytime Telephone Number
Name of Person Area Code	Daytime Telephone Number
Enclosed is a check made payable to the Florida Department liability company or \$25.00 for an administratively dissolve liability company.	nt of State for \$85.00 for an active limited ed, voluntarily dissolved or withdrawn limite

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 provision	ons of section 605.0115, Florida Statutes, the und	ersigned,	
United States Corporation Agents, Inc.		_ , hereby resigns as	
	Name of Registered Agent	_,	
Registered Agent for L	NC International LLC		
	Name of Limited Liability Company	<u></u>	 ,
L19000211073			
Document N	fumber, if known		
	ion was mailed to the above listed limited liability ed and the office discontinued on the 31st day aft		
	Signature of Resigning Agent	. 2	
If signing on behalf of	5	2020 U.J. 1283) 101-4,) + ;
	Cheyenne Moseley		ੀ (ਕਵਾ - ਫ਼ਸਵਾਰ
	Typed or Printed Name		<i>የግ</i> ሞባ
	Asst. Secretary for United States Corporation A	Agents, Inc. 영화 급	ı .
	Capacity		یر در

FILING FEES:

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Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company \$ 85.00 \$ 25.00

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