L19000239516

| (Requestor's Name) |
|---|
| |
| (Address) |
| |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
| |
| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

Registration Section Division of Corporations

TO:

| SUBJECT: VIGEO LLC | | | | |
|---|--------------------------------|---|--|--|
| Name of Lin | nited Liability | Company | | |
| DOCUMENT NUMBER: L19000239816 | | | | |
| The enclosed Resignation of Registered Agent for filing. | for a Limited | Liability Company and fee are submitted | | |
| Please return all correspondence concerning this | s matter to th | e 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: | | | |
| Joyce Yi | 800 | 773-0888 x7789 | | |
| 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. | a Department vely dissolved | of State for \$85,00 for an active limited d. voluntarily dissolved or withdrawn limited | | |
| MAILING ADDRESS: | STREE | T ADDRESS: | | |
| Registration Section | | Registration Section | | |
| Division of Corporations | | Division of Corporations | | |
| P.O. Box 6327 | Clifton | Clifton Building | | |

2661 Executive Center Circle

Tallahassee, FL 32301

INHS17 (2/14)

Tallahassee, FL 32314

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

| Pursuant to the provision | ms of section 605.0115. Florida Statutes, the und | ersigned. | | |
|--|--|---------------------------------|-------------|----------|
| United States Corporation Agents, Inc. | | _ , hereby resigns as | esions as | |
| | Name of Registered Agent | | | |
| Registered Agent for $\frac{V}{V}$ | IGEO LLC | | | - |
| | Name of Limited Liability Company | | | · |
| L19000239816 | | | | |
| Document N | umber, if known | | | |
| A copy of this resignati | on was mailed to the above listed limited liability | company at its last known a | ddress. | |
| The agency is terminate | ed and the office discontinued on the 31st day after | er the date on which this state | ment i | s filed. |
| | CM | | | |
| | Signal of Resigning Agent | :.* | 20 | |
| It signing on behalf of a | on entity: | 那 <u>你</u> | 20 S | |
| | Cheyenne Moseley | | 2020 SEP 28 | |
| | Typed or Printed Name | | 28 | 751155 |
| | Asst. Secretary for United States Corporation A | U, 42 | | |
| | Capacity | EE, FL | PM 12: 45 | Ö |

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