L19000264795

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COVER LETTER

TO: Registration Section Division of Corporations	
Olmsted Investments, LLC	
Name of Limited Liability Company	
DOCUMENT NUMBER: L19000264795	
The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are for filing.	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 notification)	
For further information concerning this matter, please call:	
at (800 773-0888	
Name of Person Area Code Daytime Telephone Number	

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:

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

INHS17 (2/14)

TO:

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ons of section 605.0115, Florida Statutes, the unders	igned,			
United States Corporation Agents Inc					
	, hereby resigns as				
Registered Agent for _	Dimsted Investments, LLC				
	Name of Limited Liability Company				•
L19000264795					
Document N	lumber, if known				
A copy of this resignati	on was mailed to the above listed limited liability co	ompany at its last k	enown a	ddress.	
The agency is terminate	ed and the office discontinued on the 31st day after t	he date on which t	his state		: filed.
If signing on behalf of a	an entity:			2021 JAN	
	Cheyenne Moseley		· · · · · · · · · · · · · · · · · · ·	NAN	÷ :
	Typed or Printed Name Asst. Secretary for United States Corporation Ager Capacity	nts, Inc.		-5 PM 12:	
				9	

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

Active limited liability company
Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company

FILING FEES:

\$ 85.00 \$ 25.00