L19000306850

(Re	questor's Name)		
(Ad	dress)		
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TO: Registration Section Division of Corporations

SUBJECT: MALAYALAM INVESTME	NT LLC
Name of Limited Liability DOCUMENT NUMBER: L19000306850	Company
The enclosed Resignation of Registered Agent for a Limited for filing.	Liability Company and fee are submitted
Please return all correspondence concerning this matter to th	e following:
United States Corporation Agents, Inc.	
Name of Person	
Legalzoom.com, Inc.	
Name of Firm/Company	
9900 Spectrum Dr.	
Address	
Austin, TX 78717	
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:	
800 at (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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ons of section 605.0115. Florida Statutes, the unde	rsigned,	
United States Corporation Agents, Inc. Name of Registered Agent		_ , hereby resigns as	
	Name of Limited Liability Company		
L19000306850			
Document N	fumber, if known		
A copy of this resignati	ion was mailed to the above listed limited liability	company at its last known addres	is.
The agency is terminate	ed and the office discontinued on the 31st day afte	r the date on which this statement	t is filed.
	Signature of Resigning Agent		
If signing on behalf of an entity:		2023 JAH 30 SELATE IMAR TALLATA	: :
Cheyenne Moseley		్రీ <u>చ</u>	
	Typed or Printed Name		a ror a
	Asst. Secretary for United States Corporation Ag	gents, Inc.	ارسط این د
	Capacity	gents, Inc.	. ∪ 2

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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