L20000000183

(Requestor's Name)		
(Address)		
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(Address)		
(City/State/Zip/Phone #)		
PICK-UP	WAIT	MAIL
(Rusin	oss Entity Nam	0)
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		





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COVER LETTER

SUBJECT: SINCE DAY ONE 2739 LLC	
Name of Limited Liab	oility Company
DOCUMENT NUMBER: L2000000183	
The enclosed Resignation of Registered Agent for a Limfor filing.	nited Liability Company and fee are 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 notificatio	n)
For further information concerning this matter, please ca	II:
Janna Pantoja	773-0888 x3950
Name of Person at (Area Co	773-0888 x3950 Daytime Telephone Number
Enclosed is a check made payable to the Florida Departn liability company or \$25.00 for an administratively disso liability company.	nent of State for \$85.00 for an active limited lved, voluntarily dissolved or withdrawn limited
In the state of th	REET ADDRESS: istration Section

Registration Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

INHS17 (2/14)

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

TO:

Registration Section Division of Corporations

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the under	ersigned,	
United States Corporation Agents, Inc.		
Name of Registered Agent	, hereby resigns as	
Registered Agent for SINCE DAY ONE 2739 LLC		
Name of Limited Liability Company		
L2000000183		
Document Number, if known		
A copy of this resignation was mailed to the above listed limited liability. The agency is terminated and the office discontinued on the 31st day after the agency of Resigning Agent. Signature of Resigning Agent.		
Cheyenne Moseley	**	
Typed or Printed Name Asst. Secretary for United States Corporation Ag	ents, Inc.	
FILING FEES: \$ 85.00 Active limited liability co \$ 25.00 Administratively dissolve	ompany	
\$ 25.00 Administratively dissolve withdrawn limited liabili	rd/ voluntarily dissolved/	

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