LZO 000004461

(Re	questor's Name)	
(Ad	dress)	
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V. 10	u.000,	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
	cument Number)	
(50	cament (valuet)	,
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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DEC 28 2020

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJ	ECT: Madilyn Hastoglis LLC Name of Lim	· ~~	
	Name of Lim	ited Liability	Company
DOCU	JMENT NUMBER: L20000004461		
The ention fili	iclosed Resignation of Registered Agent fing.	or a Limited	Liability Company and fee are submitted
Please	return all correspondence concerning this	matter to th	e following:
Unite	d States Corporation Agents, Inc.		
	Name of Person		
Legal	zoom.com, Inc.		
	Name of Firm/Company		
101 N	forth Brand Blvd. 11th Floor		
	Address		
Glend	lale, CA 91203		
	City/State and Zip Code		
raresi	gnations@legalzoom.com		
E-	mail address: (to be used for future annual report r	otification)	
For fur	ther information concerning this matter, p	dease call:	
	ot /	, 800	773-0888 Daytime Telephone Number
	Name of Person at (Area Code	Daytime Telephone Number
Habilit	ed is a check made payable to the Florida y company or \$25.00 for an administrative y company.	Department ely dissolved	of State for \$85.00 for an active limited I, voluntarily dissolved or withdrawn limited

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314 STREET ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Ft. 32301

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0113	5. Florida Statutes, the undersigned.	
United States Corporation Agents, In	C. handa a diameter	
Name of Registered Agen	, hereby resigns as	
Registered Agent for Madilyn Hastoglis L	.LC	
Name of Lim	ited Liability Company	·
L20000004461		
Document Number, if known		
A copy of this resignation was mailed to the a	bove listed limited liability company at its last known add	frees
	ntinued on the 31st day after the date on which this statem	
If signing on behalf of an entity:	Signature of Resigning Agent	
Cheyenne Mosel	ley	
Fy	ped or Printed Name	
Asst. Secretary for U	nited States Corporation Agents, Inc.	
	Capacity	** *
		c
FILING 1 \$ 85.00 \$ 25.00	FFES: Active limited liability company Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company	
	le to Florida Department of State and mail to: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	,