L2000010185

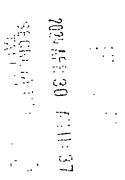
(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	(Requestor's Name)	
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies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

Office Use Only



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COVER LETTER

SUBJECT: Slay Savage LLC Name of Limited Liability	Company	
DOCUMENT NUMBER: L20000010185		
The enclosed Resignation of Registered Agent for a Limited for filing.	d Liability Company and fee are	submitted
Please return all correspondence concerning this matter to t	he following:	
United States Corporation Agents, Inc.	نزد) روان	707
Name of Person	- 10	70074 RESK
Legalzoom.com, Inc.	· · · · · · · · · · · · · · · · · · ·	30
Name of Firm/Company	-	
9900 Spectrum Dr.		F11 W 37
Address	-	ia 🗓
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

Registration Section Division of Corporations P.O. Box 6327

MAILING ADDRESS:

TO: Registration Section Division of Corporations

Tallahassee, FL 32314

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

STREET ADDRESS:

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisio	ns of section 605.0115, Florida Statutes, the under	signed.		
United States Corporation Agents, Inc. , hereby res		hereby resigns as	erehy resions as	
		nerco, resigns as		
Registered Agent for S	lay Savage LLC			
	Name of Limited Liability Company	 	·	
L20000010185				
Document No	umber, if known			
A copy of this resignation	on was mailed to the above listed limited liability o	company at its last known	address.	
The agency is terminate	ed and the office discontinued on the 31st day after	the date on which this sta	tenient is filed.	
	Signature of Resigning Agent		24 ACC 30	
	Signature of Resigning Agent			
If signing on behalf of a	in entity:		EH 37	
	Cheyenne Moseley			
	Typed or Printed Name	121	-1	
	Asst. Secretary for United States Corporation Age	ents, Inc.		
	Capacity			

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

FILING FEES:

\$ 85.00 Active limited liability company

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

Tallahassee, FL 32314