

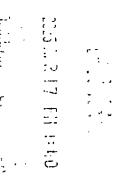
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COVER LETTER

SUBJECT: Name of Limited Liability	v Company		
DOCUMENT NUMBER: L200000021760			
The enclosed Resignation of Registered Agent for a Limite for filing.	d Liability Compa	ny and fee are s	ubmitted
Please return all correspondence concerning this matter to t	he following:		
Ryan Potter			
Name of Person	_		
ZenBusiness Inc.			2323
Name of Firm/Company	-	· .·	123 . 123 . 17
336 E. College Ave. Suite 301		٠.	
Address	-	:	= :
Tallahassee, FL 32301			
City/State and Zip Code	_	, , ,	
ra@zenbusiness.com			
E-mail address: (to be used for future annual report notification)	_		
For further information concerning this matter, please call:			
Ryan Potter 844	493-6249		
Name of Person Area Code) Daytime Telepho	ne Number	
Enclosed is a check made payable to the Florida Department			

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations

TO:

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ns of section 605.011	5. Florida Statutes, the undersigned,			
ZENBUSINESS INC.		, hereby resigns as	ereby resigns as		
	Name of Registered Age				
Registered Agent for					_
TC IMPORTS LLC					
	Name of Lin	nited Liability Company			_*
1.20000021760					
Document Nu	mber, if known				
	and the office disco	entinued on the 31st day after the date on which Signature of Resigning Agent			
	Khadijeh Hemmati				
	1	yped or Printed Name			
	Secretary		 !	??	
	FILING \$ 85.00 \$ 25.00	FEES: Active limited liability company Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company	olved/.		

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