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(Re	equestor's Name)				
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COVER LETTER

SUBJECT: VINNY D MUSIC LLC					
Name of Limited Liability Company					
DOCUMENT NUMBER: L20000029221					
The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.					
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					
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:					
at (800 773-0888					
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

TO:

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 provi	sions of section 605.011	5, Florida Statutes, the u	ndersigned.	
United States Co	orporation Agents, Ir	nc.	haraba rasi	vn. 00
Name of Registered Agent			, hereby resigns as	
Registered Agent for	VINNY D MUSIC L	LC		
	Name of Lin	nited Liability Company		,
L20000029221				
Documen	t Number, if known			
A copy of this resign	ation was mailed to the	above listed limited liabil	lity company at it	ts last known address.
If signing on behalf c	of an entity:	Signatury of Resigning Age	ent	
	Cheyenne Mose	elev		
		Typed or Printed Name		
	Asst. Secretary for t	United States Corporation	Agents, Inc.	
		Capacity		
	FILING \$ 85.00 \$ 25.00	FEES: Active limited liability Administratively dissorithdrawn limited lia	y company olved/ voluntaril ibility company	2022 J
INHS17 (2/14)	Make checks payal	ble to Florida Department Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		FILED WW 15 AM 10: 03 HASSEE, FLERHOA

INHS17 (2/14)