# LZ0000137071

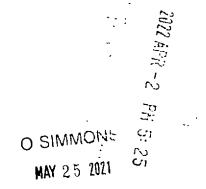
(Re	equestor's Name)	
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### **COVER LETTER**

SUBJECT:  Schedule 40 LLC  Name of Limited Lia  Name of Limited Lia	bility Company
DOCUMENT NUMBER: L20000137071	
The enclosed Resignation of Registered Agent for a Lir for 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	<del></del>
Legalzoom.com, Inc.	
Name of Firm/Company	
101 North Brand Blvd. 11th Floor	
Address	<del></del>
Glendale, CA 91203	
City/State and Zip Code	<del></del>
raresignations@legalzoom.com	
E-mail address: (to be used for future annual report notification	on)
For further information concerning this matter, please c	all:
at ( 800	<sup>773-0888</sup>
Name of Person Area C	773-0888 Code Daytime Telephone Number

#### 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 provision	one of coation (OF 0115 Place) Coation	rsigned.
	ons of section 605.0115, Florida Statutes, the under	signed, 550
United States Corporation Agents, Inc hereby		. Deteny resigns as
Registered Agent for S	~ <b>~</b>	P. S.
	-	25
	Name of Limited Liability Company	<del></del>
L20000137071		
Document Nu	umber, if known	
	on was mailed to the above listed limited liability of	
The agency is terminate	d and the office discontinued on the 31st day after  Signature of Resigning Agent	the date on which this statement is filed.
If signing on behalf of a	n entity;	
Cheyenne Moseley		
	Typed or Printed Name	
	Asst. Secretary for United States Corporation Age	ents, Inc.
	Capacity	<del></del>

**FILING FEES:** \$ 85.00 Active \$ 25.00 Admin

Active limited liability company
Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company

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