# L20000158064

(R	equestor's Name)			
(A	ddress)		_	
(A	ddress)	_		
(C	ity/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL MAIL		
(Business Entity Name)				
(Document Number)				
ertified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				
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### COVER LETTER

TO: Registration Section Division of Corporations
Division of Corporations
SUBJECT: Building Entertainment LLC
Name of Limited Liability Company
DOCUMENT NUMBER: L20000158064
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:
800 773-0888
Name of Person at ()  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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 P.O. Box 6327 Tallahassee, FL 32314

#### STREET ADDRESS:

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

INHS17 (2/14)

## STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ions of section 605.0115. Florida Statutes, the undersig	ned.
United States Cor	poration Agents, Inc.	ereby resigns as
	Name of Registered Agent	
Registered Agent for _	Building Entertainment LLC	2021 SEC
		-0 1
	Name of Limited Liability Company	
L20000158064		PH 4: 20
Document h	Number, if known	20
A copy of this resignat	ion was mailed to the above listed limited liability com	npany at its last known address.
The agency is terminat	ted and the office discontinued on the 31st day after the	date on which this statement is filed.
	Signature of Resigning Agent	
f signing on behalf of	an entity:	
	Cheyenne Moseley	
	Typed or Printed Name	<del></del>
	Asst. Secretary for United States Corporation Agents	, Inc.
	Capacity	<del></del>

FILING FEES:
\$ 85.00 Active limited liability company
\$ 25.00 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