L20000 253538

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COVER LETTER

TO:	Registration Section Division of Corporations		•	^ .	+ ,
SUBJ	DJB Ventures LLC Name of Limited Fiability				•
.50	Name of Limited Liability	Compar	ıy		
DOC	JMENT NUMBER: L20000253538		<u> </u>		
The er	nclosed Resignation of Registered Agent for a Limiteding.	l Liabilii	ty Compan	y and fee are	submitted
Please	return all correspondence concerning this matter to the	he follov	ving:		
Unite	d States Corporation Agents, Inc.				
	Name of Person	-			
Lega	zoom.com, Inc.				
	Name of Firm/Company	-			
9900	Spectrum Dr.				
	Address	-			
Austi	n, TX 78717				
	City/State and Zip Code	-			
rares	ignations@legalzoom.com				
E	mail address: (to be used for future annual report notification)	-			
For fu	rther information concerning this matter, please call:				
	Name of Person at t Area Code	773-0	888		
	Name of Person Area Code	Daytin	ne Telephon	ie Number	
Jiabilit	sed is a check made payable to the Florida Departmen y company or \$25.00 for an administratively dissolve y company.	t of Stated, volun	e for \$85.0 tarily disso	0 for an activ olved or with	e limited drawn limited

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

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

			2021 NOV -2 SECRETARY	
			ACR. 8	
Pursuant to the provision	ons of section 605.0115, Florida Statutes.	the undersigned,	N N	
United States Corp	ooration Agents, Inc.	b water and one or	震災 2	
	Name of Registered Agent	hereby resigns as	Sign PA	7 = 20
Registered Agent for D	JB Ventures LLC		PM 12: 48	
			- G	
	Name of Limited Liability Compan	Ņ	,	
L20000253538				
· · · · · · · · · · · · · · · · · · ·	umber, if known			
Document No A copy of this resignation	on was mailed to the above listed limited			īled.
Document No A copy of this resignation	on was mailed to the above listed limited and the office discontinued on the 31s	t day after the date on which		īled.
Document No Document No A copy of this resignation. The agency is terminate	on was mailed to the above listed limited and the office discontinued on the 31s	t day after the date on which		iled.
Document No Document No A copy of this resignation. The agency is terminate	on was mailed to the above listed limited and the office discontinued on the 31s	t day after the date on which		ìled.
Document No A copy of this resignation	on was mailed to the above listed limited and the office discontinued on the 31s Signature of Resigning entity:	t day after the date on which		îled.
Document No Document No A copy of this resignation. The agency is terminate	on was mailed to the above listed limited and the office discontinued on the 31s Signature of Resignion entity: Cheyenne Moseley	t day after the date on which		iled.

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