L20000290771

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
(= , = = = ,		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer;		
Special instructions to 1 lining Officer.		
<u> </u>		

Office Use Only



600417442556

10/31/23--01044--009 **25.00

2023 OCT 31 AM 9: 59

COVER LETTER

SUBJECT: Melissa Galovic Photography LLC Name of Limited Liability Company DOCUMENT NUMBER: L20000290771 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:

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

TO:

Registration Section Division of Corporations

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provi-	sions of section 605.0115, Florida Statutes, the ur	ndersigned,
United States Corporation Agents, Inc. , her		, hereby resigns as
		, nereoy resigns as
Registered Agent for	Melissa Galovic Photography LLC	
	Name of Limited Liability Company	
L20000290771		
Document	Number, if known	
	ation was mailed to the above listed limited liabil ated and the office discontinued on the 31st day a	⇒ 50 23
	Signature of Resigning Age	· · · · · · · · · · · · · · · · · · ·
If signing on behalf o	f an entity:	9: 59 5: FE
	Cheyenne Moseley	
	Typed or Printed Name	
	Asst. Secretary for United States Corporation	Agents, Inc.
	Capacity	

FILING FEES:

\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ withdrawn limited liability company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