L20000304006

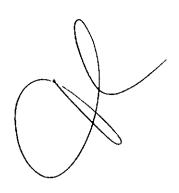
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COVER LETTER

SUBJECT: Name of Limited Liability Company	
DOCUMENT NUMBER: L20000304006	
The enclosed Resignation of Registered Agent for a Limited Liability Company and for filing.	fee are submitted
Please return all correspondence concerning this matter to the following:	
Chelsea Chapman	
Name of Person)22 N
Legaline Corporate Services, INC.	- A0
Name of Firm/Company	- E
10601 Clarence Dr Ste 250	2022 NOV 15 PM 12: 18
Address	2: -
Frisco, TX 75033-3867	· 전 👁
City/State and Zip Code	
ra@legalinc.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Chelsea Chapman at (844)386-0178 Name of Person Area Code Daytime Telephone Numb	ber

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Registration Section Division of Corporations

TO:

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

INHS17 (2/14)

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provi	sions of section 605.0115, Florida Statutes, the un-	dersigned,	
Legaline Corporate Services, INC.		, hereby resigns as	
	Name of Registered Agent	_ (Hereby vesighe de	
Registered Agent for	TEARUP MUSIC LLC		_
	Name of Limited Liability Company		
L20000304006			
Documen	t Number, if known		
	ation was mailed to the above listed limited liabilit		
The agency is termin	sated and the office discontinued on the 31st day af	•	is filed.
If signing on behalf of	of an entity:	<i>ن</i> د	-
	Chelsea Chapman	ان. دي. ي.	
	Typed or Printed Name		<i>`</i> → • • • • • • • • • • • • • • • • • •
	On Behalf of Legaline Corporate Services, INC.	, <u>ii</u>	-
	Capacity		

FILING FEES:

S 85.00 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withdrawn limited liability company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