## 12000310931

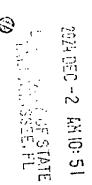
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Special Instructions to Filing Officer:				
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## COVER LETTER

Registration Section Division of Corporations SUBJECT: Perform More LLC Name of Limited Liability Company DOCUMENT NUMBER: L20000310931 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: Name of Person Enclosed is a check made payable to the Florida Department of State for \$85.00 for a sective limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company. MAILING ADDRESS: STREET ADDRESS: Registration Section Registration Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

TO:

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

Pursuant to the provision	s of section 605.0115, Florida Statute	s, the undersigned,
United States Corporation Agents, Inc.  Name of Registered Agent		, hereby resigns as
		hereby resigns as
Registered Agent for Pe	rform More LLC	
	Name of Limited Liability Compa	ny.
L20000310931		
Document Nun	nber, if known	
A conv of this resignation	n was mailed to the above listed limite	ed liability company at its last known address.
Treepy of the resignation	was maried to the above listed mine	a hability company at its tast known address.
The agency is terminated	and the office discontinued on the 31	st day after the date on which this statement is filed.
	51/ 11	
	Crik Treutle	
	Signature of Resign	ring Agent
If signing on behalf of an	entity:	
	Erik Treutlein	
•	Typed or Printed Name	•
	Vice President on behalf of United States Co	orporation Agents, Inc.
•	Capacity	
		SS. SELLL.
	FILING FEES: \$ 85.00 Active limited	liability company
	\$ 25.00 Administrativel	lv dissolved/ voluntarily dissolved/ - \cong \co
	withdrawn lim	ited liability company of the First
		THE COMPANY SET OF STATE OF ST
	Make checks payable to Florida Depa	ortment of State and mail to:
	Division of Corpo	

P.O. Box 6327 Tallahassee, FL 32314