120000 332037

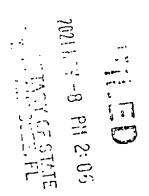
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Office Use Only



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COVER LETTER

SUBJECT: Skate Guild L.L.C. Name of Limited Liability	Company
DOCUMENT NUMBER: L20000332037	Company
DOCUMENT NUMBER:	
The enclosed Resignation of Registered Agent for a Limited for filing.	Liability Company and fee are submitted
Please return all correspondence concerning this matter to the	ne 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:	
at (773-0888
Name of Person 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

TO: Registration Section Division of Corporations

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

Pursuant to the provisio	ons of section 605.011:	5, Florida Statutes, the unde	rsigned.	
United States Corporation Agents, Inc.		, hereby resigns as		
Name of Registered Agent				
Registered Agent for S	kate Guild L.L.C.			
	Name of Lim	ited Liability Company		<u>,</u>
L20000332037				
Document No	umber, it known			
A copy of this resignation	on was mailed to the a	above listed limited liability	company at its last known addr	ess.
The agency is terminate		ntinued on the 31st day afte	r the date on which this stateme	ent is filed.
	Cheyenne Mose	ley		
	17	yped or Printed Name		
	Asst. Secretary for U	Inited States Corporation Ag	ents, Inc.	
		Capacity	<u> </u>	
	FILING \$ 85.00 \$ 25.00	FEES: Active limited liability ed Administratively dissolve withdrawn limited liabil	ompany ed/voluntarily dissolved/ ity company	

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314