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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
| (Document Number) |
| (Document Number) |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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COVER LETTER

SUBJECT: Assistant Principle LLC Name of Limited Liability Company DOCUMENT NUMBER: L20000368312 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 provisions of sect | ion 605.0115, I | Florida Statutes, the unders | igned, | |
|--|--------------------------|--|--|--------------------|
| United States Corporation Agents, Inc. , hereby resigns as | | | | |
| | Registered Agent | | nereby resigns as | |
| Registered Agent for Assistant | Principle LL | .C | | |
| | Name of Limited | 1 Liability Company | | , |
| L20000368312 | | | | |
| Document Number, if kn | own | _ | | |
| A copy of this resignation was ma | niled to the abo | ve listed limited liability co | ompany at its last kn | own address. |
| The agency is terminated and the | | | | |
| | ~ | Tractlein gnature of Resigning Agent | <u>-</u> | |
| | 31 | guatore of Resigning Agent | | |
| If signing on behalf of an entity: | | | | 20 S |
| Erik Tr | eutlein | | | TEO PER PER |
| | Туре | d or Printed Name | | TREE ST |
| Vice President on behalf of United States Corporation Agents, Inc. | | nts, Inc. | 77. | |
| | | Capacity | | |
| | | | | 2025 FEB 19 PH 12: |
| | FILING FE | ES: | | - చ |
| | \$ 85.00 A \$ 25.00 A | vetive limited liability com administratively dissolved/ withdrawn limited liability | ipany / voluntarily dissolv -company | ⁄ed/ |

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