CH000051797

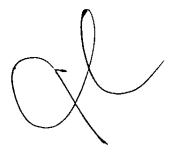
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP		MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



300402184523

2023 FEB 22 PM 12: 25



COVER LETTER

3

SUBJECT: L&M HOSTING LLC				
Name of Limited Liability	Company	•		
DOCUMENT NUMBER: L21000051797		-		
The enclosed Resignation of Registered Agent for a Limited for filing.	l Liability Company and fee ar	e subi	mitte	d
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.		, - 1	~	
Address	A	in S	№ 3	
Austin, TX 78717			2023 FEB 22	43
City/State and Zip Code	AS		~	
raresignations@legalzoom.com	ָּתוּ גע רע) No.	PM 12: 25	0.8
E-mail address: (to be used for future annual report notification)		! <u>₹</u>	'? ' 2	
For further information concerning this matter, please call:		;	CJ1	
800 at (773-0888			
	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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 provisions of section 605.0115, Florida Statutes, t	he undersigned,	
United States Corporation Agents, Inc.	, hereby resigns as	
Name of Registered Agent		
Registered Agent for L&M HOSTING LLC		
Name of Limited Liability Company	·	
L21000051797		
Document Number, if known		
A copy of this resignation was mailed to the above listed limited l	iability company at its last known address.	
The agency is terminated and the office discontinued on the 31st of the agency is terminated and the office discontinued on the 31st of the agency is terminated and the office discontinued on the 31st of the agency is terminated and the office discontinued on the 31st of the agency is terminated and the office discontinued on the 31st of the agency is terminated and the office discontinued on the 31st of the agency is terminated and the office discontinued on the 31st of the agency is agency is the agency is the agency is the agency is the agency is agency in a agency is agency i	day after the date on which this statement is filed.	
Signature of Resigning	2023 FEB 22 SECRELIAN TALL AHA	
If signing on behalf of an entity:	22 FAX	
Cheyenne Moseley		
Typed or Printed Name		
Asst. Secretary for United States Corpora	ation Agents, Inc.	
Capacity		

FILING FEES:
\$ 85.00 Active limited liability company
\$ 25.00 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