# L Z10000 68477





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### **COVER LETTER**

Division of Corporations SUBJECT: Paradigm Shifter Consulting LLC Name of Limited Liability Company DOCUMENT NUMBER: L21000068477 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:

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

TO:

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 provision	ons of section 605.0115, Florida Statutes, the under	signed,
United States Corporation Agents, Inc.		hereby resigns as
	Name of Registered Agent	neredy resigns as
Registered Agent for	Paradigm Shifter Consulting LLC	
	Name of Limited Liability Company	,
L21000068477		
Document N	umber, if known	
	on was mailed to the above listed limited liability c	
The agency is terminate	Tik Treatlein  Signature of Resigning Agent	the date on which this statement is filed.
If signing on behalf of a	an entity:	
	Erik Treutlein	
	Typed or Printed Name	
	Vice President on behalf of United States Corporation Ag	ents, Inc.
	Capacity	<del></del>

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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