L21000272689

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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COVER LETTER

Division of Corporations	•		
SUBJECT: DotIO LLC Name of Limited Liability	/ Company	-	
DOCUMENT NUMBER: L21000272689		_	
The enclosed Resignation of Registered Agent for a Limited for filing.	d Liability Company and fee ar	e submitt	:ed
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		2	
9900 Spectrum Dr.	· _:	2022 AUG	
Address		: SU	2
Austin, TX 78717	.c	<u>-</u>	*7=ct
City/State and Zip Code		A H	" [
raresignations@legalzoom.com	Ξ:	AM 10: 34	•
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

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

ruisuant to the provisi	ons of section 605.0115. Florida Statutes, the unders	igned,		
United States Corporation Agents, Inc.		hereby resigns as		
Name of Registered Agent				
Registered Agent for _	DotIO LLC			
	Name of Limited Liability Company			,
L21000272689				
Document N	lumber, if known			
A copy of this resignat	ion was mailed to the above listed limited liability co	ompany at its last known a	address.	
The agency is terminate	ed and the office discontinued on the 31st day after t	he date on which this stat	ement is	filed.
	Signature of Resigning Agent	, 	2022 AUG	^_ *
If signing on behalf of an entity: Cheyenne Moseley		÷.	ne -	
				्रा
	Typed or Printed Name	- .	AH	 1 B G
	Asst. Secretary for United States Corporation Agen	its, Inc.	10: 3	
	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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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