L21000368915

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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Your Travel Agent Lisa Miller L	LC.
Name of Limited Liability Compar	y
DOCUMENT NUMBER: L21000368915	
The enclosed Resignation of Registered Agent for a Limited Liabilit for filing.	y Company and fee are submitted
Please return all correspondence concerning this matter to the follow	/ing:
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	·- •2
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
at (773-0	
Name of Person Area Code Daytin	ne 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Pursuant to the provision	ns of section 605.0115,	Florida Statutes, the unders	signed,	
United States Corpo	oration Agents, Inc		hereby resigns as	
	Name of Registered Agent		nereoy reorgino do	
Registered Agent for Yo	our Travel Agent Li	sa Miller LLC		-
	Name of Limite	ed Liability Company		٠
L21000368915				
Document Nu	mber, if known	_		
-	d and the office discont	inued on the 31st day after	ompany at its last known address. the date on which this statement is	
		Treutlein Signature of Resigning Agent		
If signing on behalf of a	n entity:			
	Erik Treutlein			
	Тур	ed or Printed Name	·	, •
	Vice President on behalf	of United States Corporation Ago	ents, Inc.	
		Capacity		
	FILING F \$ 85.00 \$ 25.00	EES: Active limited liability con Administratively dissolved withdrawn limited liability	npany // voluntarily dissolved/ v company	

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