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

TO: Registration Section Division of Corporations				
SUBJECT: GJD Technologies USA LLC Name of Limited Liability Company				
DOCUMENT NUMBER: L21000374677				
The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submit for filing.	ted			
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 at (800)773-0888 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Pursuant to the provision	ons of section 605.0115, Florida Statutes.	the undersigned,
United States Corporation Agents, Inc.		, hereby resigns as
Name of Registered Agent		; recess resigns us
Registered Agent for _	GJD Technologies USA LLC	
	Name of Limited Liability Compan	y
L21000374677		
Document N	lumber, if known	
A copy of this resignat	ion was mailed to the above listed limited	liability company at its last known address.
The agency is terminat	ed and the office discontinued on the 31s	day after the date on which this statement is filed.
	Signature of Resigni	ng Agent
If signing on behalf of	an entity:	
	Cheyenne Moseley	
	Typed or Printed Name	
	Asst. Secretary for United States Corpo	ration Agents. Inc.
	Capacity	

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withdrawn limited liability company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