## L21000388602

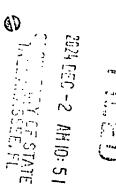
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## **COVER LETTER**

**TO:** Registration Section Division of Corporations

SUBJECT: MINIMALIST LUXE	LLC		
Name of Lin	nited Liability	Company	
DOCUMENT NUMBER: L21000388602		<del>,</del> .	
The enclosed Resignation of Registered Agent for filing.	for a Limitec	Liability Company and	fee are submitted
Please return all correspondence concerning this	s matter to th	ne following:	
United States Corporation Agents, Inc.			
Name of Person	<u>-</u>		
Legalzoom.com, Inc.			
Name of Firm/Company			
9900 Spectrum Dr.			
Address			
Austin, TX 78717			
City/State and Zip Code	<del></del>		
raresignations@legalzoom.com			
E-mail address: (to be used for future annual report	notification)		
For further information concerning this matter,	please call:		
at	(800	773-0888 Daytime Telephone Num	
Name of Person	Area Code	Daytime Telephone Num	ber
Enclosed is a check made payable to the Florida liability company or \$25.00 for an administrativ liability company.	. Department ely dissolved	of State for \$85.00 for a I, voluntarily dissolved o	active limited or withdrawn-limited
MAILING ADDRESS:	STREE	T ADDRESS:	(***)
Registration Section	Registration Section (77)		AHIO: 52
Division of Corporations	Division of Corporations		対め
P.O. Box 6327	• • • • • • • • • • • • • • • • • • • •		
Tallahassee, FL 32314	2661 Executive Center Circle		

Tallahassee, FL 32301

## STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provis	ions of section 605.011:	5. Florida Statutes, the under	rsigned,	
United States Cor	rporation Agents, In	C.	, hereby resigns as	
	Name of Registered Ager	nt .	, hereby resigns as	
Registered Agent for	MINIMALIST LUXE	LLC		
	Name of Lim	ited Liability Company		
L21000388602				
Document	Number, if known	<del></del>		
	ted and the office discor		company at its last known address.  the date on which this statement is f	iled.
If signing on behalf of	an entity:			
	Erik Treutlein			
	Ty	ped or Printed Name		
	Vice President on behal	f of United States Corporation Ag	ents, Inc.	
	<u>FILING</u> 1	Capacity		
	\$ 85.00 \$ 25.00	Active limited liability cor Administratively dissolved withdrawn limited liability	d/voluntarily dissolved/ y company	a in t
	wrake checks payabl	e to Florida Department of St	tate and mail to:	٠.

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314