L21000396126

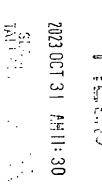
(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
unils		





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COVER LETTER

SUBJECT: Intrinsic GroupFL L.L.C. Name of Limited Liabi	lity Company
DOCUMENT NUMBER: L21000396126	
The enclosed Resignation of Registered Agent for a Limi for filing.	ted Liability Company and fee are submitted
Please return all correspondence concerning this matter to	o the following:
United States Corporation Agents, Inc.	
Name of Person	<u> </u>
Legalzoom.com, Inc.	
Name of Firm/Company	
9900 Spectrum Dr.	
Address	<u> </u>
Austin, TX 78717	
City/State and Zip Code	<u> </u>
raresignations@legalzoom.com	
E-mail address: (to be used for future annual report notification))
For further information concerning this matter, please cal	I:
31 (800	773-0888
Yame of Person Area Co	de Daytime Telephone Number

MAILING ADDRESS:

liability company.

TO: Registration Section Division of Corporations

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F. 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 provisions of section 605.011.	5, Florida Statutes, the undersigne	ed.			
United States Corporation Agents, In	C. here	by resigns as			
Name of Registered Agent		, hereby resigns as			
Registered Agent for Intrinsic GroupFL L	L.C.				
Name of Lim	ited Liability Company		·	 ,	
L21000396126					
Document Number, if known					
A copy of this resignation was mailed to the a	bove listed limited liability comp	any at its last k	mown ac	ldress	
The agency is terminated and the office disco		·			filed.
	Signature of Resigning Agent				
f signing on behalf of an entity:					
Cheyenne Mose	ley				
Т	yped or Printed Name				
Asst. Secretary for U	Inited States Corporation Agents,	Inc.			
	Capacity			2023 OCT 3	<u></u>
FILING \$ 85.00 \$ 25.00	FEES: Active limited liability compar Administratively dissolved/ vo withdrawn limited liability cor	funtarily disso	lved/	31 AM11	

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