# 121000486700

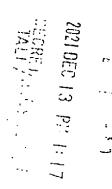
(Requestor's Name)
(Address)
(Address)
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(Business Entity Name)
(Document Number)
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#### **COVER LETTER**

**TO:** Registration Section Division of Corporations

SUBJECT: KAT CONSULTING & DESIGN LLC	
Name of Limited Liability	Company
DOCUMENT NUMBER: L21000486700	· · · · · · · · · · · · · · · · · · ·
The enclosed Resignation of Registered Agent for a Limited for tiling.	Liability Company and fee are submitted
Please return all correspondence concerning this matter to the	e 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:	
800 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Pursuant to the provision	ons of section 605.0115, Florida Statutes, the under	ersigned.		
United States Corporation Agents, Inc. , hereby resigns as				
	Name of Registered Agent	_ , mereby redigita da		
Registered Agent for K	AT CONSULTING & DESIGN LLC			_
	Name of Limited Liability Company			<b>_</b> ·
L21000486700				
Document N	umber, if known			
A copy of this resignati	on was mailed to the above listed limited liability	y company at its last know	n address	3.
The agency is terminate	ed and the office discontinued on the 31st day after the state of Resigning Agent		tatement	is filed.
If signing on behalf of a	an entity:		20	
	Cheyenne Moseley		2021 DEC 13	
	Typed or Printed Name		EC	3
	Asst. Secretary for United States Corporation A	gents, Inc.	$\overline{3}$	•,
	Capacity		PK I: I	- 14 - 12 - 13 - 14
	FILING FEES: \$ 85.00 Active limited liability of Administratively dissolved withdrawn limited liability of Administratively dissolved withdrawn limited liability.	ved/ voluntarily dissolved	7	

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