L22000051800

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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0/11/8/2023

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Hillhouse Tech LLC
Name of Limited Liability Company
DOCUMENT NUMBER: L22000051800
The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

INHS17 (2/14)

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115.	Florida Statutes, the unders	igned.	
Name of Registered Agent		, hereby resigns as	
Name of Limite	ed Liability Company		
L22000051800			
Document Number, if known			
A copy of this resignation was mailed to the ab	ove listed limited liability co	ompany at its last known address.	
The agency is terminated and the office discont	inued on the 31st day after t	he date on which this statement is	filed.
	Signature of Resigning Agent	2023 OCT 31	
If signing on behalf of an entity:		∹ ω	
Cheyenne Mosele	ey		
Тур	ed or Printed Name		
Asst. Secretary for Un	ited States Corporation Agen	ts, Inc. 5. 23	
	Capacity	ω	

FILING FEES:
\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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