L22000 139471

(Requestor's Name)
(Address)
(Address)
(last 255)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, ,
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600431133686

26,413 34--6,325--015 **25,30

SECRETARY OF PIATE
TALL ARRY OF PIATE

COVER LETTER

SUBJECT: Biznacho LLC	
Name of Limited Liability Company	_
DOCUMENT NUMBER: L22000139471	_
The enclosed Resignation of Registered Agent for a Limited Liability Company and fee a for filing.	re submitted
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	2024
9900 Spectrum Dr.	
Address	12 12
Austin, TX 78717	MH: 28
City/State and Zip Code	公 1.2
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

TO:

Registration Section Division of Corporations

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisio	ns of section 605.0115, Florida Statutes, the und	lersigned,		
United States Corporation Agents, Inc.		_ , hereby resigns as		
	Name of Registered Agent	_ (Ne.co) 1001g.10 40		
Registered Agent for <u>B</u>	iznacho LLC			
	Name of Limited Liability Company	<u></u>		,*
L22000139471				
Document No	umber, if known			
A copy of this resignation	on was mailed to the above listed limited liability	y company at its last kno-	wn address.	
The agency is terminate	ed and the office discontinued on the 31st day aft	ter the date on which this	statement is	s filed
	Crik Treutlein			
	Signature of Resigning Agent	<u> </u>	20	
If signing on behalf of a	in entity:	TAL!	2021, JUH 12	ا تنت
	Erik Treutlein		;	1927) Nati P ^{erso}
	Typed or Printed Name			7"3
	Vice President for United States Corporation A	gents, Inc. المراجة المواقعة ا		
	Capacity		MH II: 28	*******

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

Active limited liability company
Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

FILING FEES:

\$ 85.00 \$ 25.00

Tallahassee, FL 32314