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TO: Registration Section Division of Corporations

SUBJECT: Azur Consultants Internati	ional LLC		
Name of Limited Liability		•	
DOCUMENT NUMBER: L22000149929			
The enclosed Resignation of Registered Agent for a Limited for filing.	d Liability Company and fee ar	e submitte	ed .
Please return all correspondence concerning this matter to the	ne following:		
United States Corporation Agents, Inc.			
Name of Person	-		
Legalzoom.com, Inc.			
Name of Firm/Company	•		
9900 Spectrum Dr.			
Address	-		
Austin, TX 78717		21	
City/State and Zip Code		2 072 S	
raresignations@legalzoom.com		SE) 1	
E-mail address: (to be used for future annual report notification)	•	σ	• ••
For further information concerning this matter, please call:		- III 9:	
800	773-0888	: 2	
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

INHS17 (2/14)

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ions of section 605.011	5, Florida Statutes, the und	ersigned,			
United States Corporation Agents, Inc. hereby res						
	Name of Registered Age		_ , nerooy resigns as			
Registered Agent for _	Azur Consultants II	nternational LLC			_	
	Name of Lin	nited Liability Company		·	<u>_</u> ,	
L22000149929						
Document ?	Number, if known					
A copy of this resignat	tion was mailed to the a	above listed limited liability	v company at its last knov	vn addres	S.	
		Signature of Resigning Agent		statement	is fil	led.
If signing on behalf of	an entity:					
	Cheyenne Mose	eley				
	T	'yped or Printed Name			202	
	Asst. Secretary for l	United States Corporation A	gents, Inc.	5	2022 SIP	
		Capacity			رن درز	وي شو وي شو
	FILING \$ 85.00 \$ 25.00	Active limited liability	company ved/ voluntarily dissolved	<u></u>	A! 0.	

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

withdrawn limited liability company