

L22000289950

(Requestor's Name)

(Address)

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(Business Entity Name)

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STATE OF FLORIDA
TALLAHASSEE, FL

A handwritten signature, likely belonging to the filing officer, is placed here.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Matt Dorrough LLC

Name of Limited Liability Company

DOCUMENT NUMBER: L22000289950

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:

800 773-

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

STREET ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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2000 UNIVERSITY
ST. PALM BEACHES, FL

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

United States Corporation Agents, Inc. _____, hereby resigns as
Name of Registered Agent

Registered Agent for Matt Dorrough LLC _____

Name of Limited Liability Company

L22000289950

Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.



Signature of Resigning Agent

If signing on behalf of an entity:

Cheyenne Moseley

Typed or Printed Name

Asst. Secretary for United States Corporation Agents, Inc.

Capacity

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FL
2023 OCT 31 AM 9:58
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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withdrawn limited liability company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