TSS 000 353 306

| (Requestor's Name) | | |
|---|--|--|
| (Address) | | |
| (Address) | | |
| (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



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COVER LETTER

TO: Registration Section Division of Corporations

| SUBJECT: Reyes official LLC | |
|--|---|
| Name of Limited Liability | Company |
| DOCUMENT NUMBER: L22000323306 | |
| The enclosed Resignation of Registered Agent for a Limited for filing. | d Liability Company and fee are submitted |
| 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 | 201 |
| 9900 Spectrum Dr. | 1071 F T 30 |
| Address | |
| Austin, TX 78717 | |
| City/State and Zip Code | · · · · · · · · · · · · · · · · · · · |
| raresignations@legalzoom.com | $\frac{\omega}{\omega}$ |
| E-mail address: (to be used for future annual report notification) | |
| For further information concerning this matter, please call: | |
| 800 | 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 Corp | poration Agents, Inc. | hereby resigns as |
| | Name of Registered Agent | Hereby resigns as |
| Registered Agent for _ | Reyes official LLC | |
| | Name of Limited Liability Company | · |
| L22000323306 | | |
| Document N | umber, if known | , ~2 |
| A copy of this resignati | on was mailed to the above listed limited liability | company at its last known address. |
| The agency is terminate | ed and the office discontinued on the 31st day after | er the date on which this statement is filed. |
| | Signature of Resigning Agent | |
| If signing on behalf of a | in entity: | · 설 |
| | Cheyenne Moseley | |
| | Typed or Printed Name | |
| | Asst. Secretary for United States Corporation Ag | gents, Inc. |
| | Capacity | |
| | | |

\$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