122000 333348

(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:

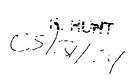




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COVER LETTER

Division of Corporations SUBJECT: Video Game Soup LLC Name of Limited Liability Company DOCUMENT NUMBER: L22000333348 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:

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

Name of Person

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

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ns of section 605.011:	, Florida Statutes, the undersign	ed.	
United States Corporation Agents, Inc.			eby resigns as	
Name of Registered Agent			20 y 14.11. <u>G</u> 112 11.11	
Registered Agent for Vi	deo Game Soup	LC		
	Name of Lim	ted Liability Company		
L22000333348				
Document Nu	mber, if known			
A copy of this resignatio	n was mailed to the a	bove listed limited liability comp	oany at its last known	address.
The agency is terminated	I and the office disco	ntinued on the 31st day after the	date on which this sta	tement is filed.
		Signature of Resigning Agent		
lf signing on behalf of ar	n entity;			
	Cheyenne Moseley			
	T	ped or Printed Name		•
	Asst. Secretary for United States Corporation Agents, Inc.			
		Capacity		
	FILING	FFFS:		•
	\$ 85.00 \$ 25.00	Active limited liability compa Administratively dissolved/ vo withdrawn limited liability co	ny oluntarily dissolved/ ompany	S

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