L 22000 382 665

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COVER LETTER

SUBJECT: Grantology LLC Name of Limited Liability Company DOCUMENT NUMBER: L22000382665 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: Name of Person

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

TO:

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 provis	ions of section 605.0115, Florida Statutes, the	e undersigned,	
United States Corporation Agents, Inc. Name of Registered Agent		horaby rasions as	
		. hereby resigns as	
Registered Agent for	Grantology LLC		
	Name of Limited Liability Company		
L22000382665			
Document	Number, if known		
A copy of this resigna	tion was mailed to the above listed limited lia	ability company at its last known address.	
The agency is termina	ited and the office discontinued on the 31st da	ly after the date on which this statement is fil	ed.
	Signature of Resigning A	Agent PACKET	
If signing on behalf of an entity:		三	٠.
	Cheyenne Moseley	1	
	Typed or Printed Name		. <u>-</u>
	Asst. Secretary for United States Corporati	ion Agents, Inc.	٠,
	Capacity	ion Agents, Inc.	

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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