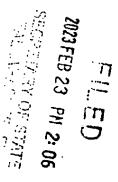
L2200499104

| (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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Office Use Only



300402886043





COVER LETTER

SUBJECT: Space "A" Organizing LLC Name of Limited Liability Company DOCUMENT NUMBER: L22000499104 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 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 Division of Corporations

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

| Pursuant to the provision | ons of section 605.0115, Florida Statutes, the undersi | gned, | |
|--|---|---------------------------------------|--|
| United States Corporation Agents, Inc. | | _ , hereby resigns as | |
| | Name of Registered Agent | | |
| Registered Agent for | Space "A" Organizing LLC | | |
| | Name of Limited Liability Company | , | |
| L22000499104 | | | |
| Document N | lumber, if known | | |
| | ion was mailed to the above listed limited liability co ed and the office discontinued on the 31st day after t | | |
| | Signature of Resigning Agent | 23 PM 2:07 | |
| lf signing on behalf of | an entity: | : : : : : : : : : : : : : : : : : : : | |
| | Cheyenne Moseley | 07 | |
| | Typed or Printed Name | | |
| | Asst. Secretary for United States Corporation Agen | its, Inc. | |
| | Capacity | | |

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