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(Requestor's Name)				
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(Cit	y/State/Zip/Phone	#)		
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Special Instructions to I	- Filing Officer:			
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SECRETALITY OF SELECTION OF THE SELECTIO

COVER LETTER

SUBJECT: Trendar Consulting LLC		
Name of Limited Liability	Company	
DOCUMENT NUMBER: L22000522251	<u> </u>	
The enclosed Resignation of Registered Agent for a Limited for filing.	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		
9900 Spectrum Dr.	TAC SECT	i - : - : - : - : - : - : - : - : - : -
Address		1 28 ::
Austin, TX 78717		30
City/State and Zip Code	·	19
raresignations@legalzoom.com		2: 1,5
E-mail address: (to be used for future annual report notification)		O1
For further information concerning this matter, please call:		
at (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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

TO: Registration Section Division of Corporations

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 unders	igned,		
United States Corp	poration Agents, Inc.	hereby resigns as		
	Name of Registered Agent	leteby fesigns as		
Registered Agent for	rendar Consulting LLC			
	Name of Limited Liability Company			•
L22000522251				
Document N	umber, if known			
	on was mailed to the above listed limited liability co		F: 3	~ y
·	PIIX		D	•
	Signature of Resigning Agent		: i>	
If signing on behalf of an entity:			:-: <u>.</u>	
	Cheyenne Moseley			
	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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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