L22000535351

(Re	questor's Name)		
(Ad	dress)		
	dress)		
(Address)			
(Cit	y/State/Zip/Phone	· #)	
<u> </u>		—	
PICK-UP	WAIT	MAIL	
(Bu	siness Entity Nam	ne)	
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	cument Number)		
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Certified Copies	_ Certificates	of Status	
Special Instructions to	Ciling Officer:	·	
Special Instructions to Filing Officer:			
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Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Steel Body By Syd LLC Name of Limited Liability Company DOCUMENT NUMBER: L22000535351 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.

3 - 1			
Name of Person			
Legalzoom.com, Inc.			
Name of Firm/Company			
9900 Spectrum Dr.			
Address		65	21
Austin, TX 78717		345 250 150 150 150 150 150 150 150 150 150 1	2024 JAN 17
City/State and Zip Code		2.7	
raresignations@legalzoom.com		3.77	
E-mail address: (to be used for future annual report notification)		i iro	- EE
For further information concerning this matter, please call:		프	MH IO: 33
at (773-0888		
Name of Person Area Code	Daytime Telephone Nu	ımber	

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 provisions of section 605.	.0115, Florida Statutes, the under	signed,
United States Corporation Agents	s, Inc.	hereby resigns as
Name of Registered Agent , nereby		nereby resigns as
Registered Agent for Steel Body By S	Syd LLC	
Name of	f Limited Liability Company	367
L22000535351		
Document Number, if known		
A copy of this resignation was mailed to the agency is terminated and the office d		
	Signature of Resigning Agent	
If signing on behalf of an entity:		
Cheyenne Moseley		
	Typed or Printed Name	
Asst. Secretary t	for United States Corporation Age	nts, Inc.
	Capacity	

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

FILING FEES:
\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

Tallahassee, FL 32314