L23000136561

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(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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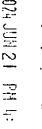
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COVER LETTER

Westside Travel at Argyle LLC Name of Limited Liability Company DOCUMENT NUMBER: L23000136561 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited

MAILING ADDRESS:

liability company.

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 provision	ons of section 605.0115, Florida Statutes, the uno	dersigned,	
United States Corporation Agents, Inc. Name of Registered Agent		, hereby resigns as	
	Name of Limited Liability Company	•	
L23000136561			
Document N	umber, if known		
A copy of this resignati	on was mailed to the above listed limited liabilit	y company at its last known address.	
The agency is terminate	ed and the office discontinued on the 31st day af	ter the date on which this statement is file	≥d.
	Tik Treatlein Signature of Resigning Agent	S 3	- -u
If signing on behalf of an entity:			=12
	Erik Treutlein		
	Typed or Printed Name		ر: • پ
	Vice President for United States Corporation A	igents, Inc.	, , , , †
	Capacity	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