L73000142829

(Requestor's Name)			
(Address)			
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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Amateur Golf League LLC	
Name of Limited Liability Company	~
DOCUMENT NUMBER: L23000162829	
The enclosed Resignation of Registered Agent for a Limited Liability Compfor filing.	pany and fee are submitted
Please return all correspondence concerning this matter to the following:	
United States Corporation Agents, Inc.	
Name of Person	
Legalzoom.com, Inc.	:2
Name of Firm/Company	
9900 Spectrum Dr.	7077 F 4 c 60Z
Address	\mathcal{J}_{i}
Austin, TX 78717	
City/State and Zip Code	···
raresignations@legalzoom.com	3
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
800 773-0888	
Name of Person Area Code Daytime Telepl	none 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

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 provi-	sions of section 605.0115. Florida Statutes, the unde	ersigned.
United States Co	rporation Agents, Inc.	, hereby resigns as
Name of Registered Agent		. Hereby resigns as
Registered Agent for	Amateur Golf League LLC	
	Name of Limited Liability Company	·
L23000162829		
Document	Number, if known	
A copy of this resigna	ation was mailed to the above listed limited liability	company at its last known address?
The agency is termina	ated and the office discontinued on the 31st day afte	r the date on which this statement is filed.
	Signature of Resigning Agent	
If signing on behalf o		
	Cheyenne Moseley	2
	Typed or Printed Name	
	Asst. Secretary for United States Corporation Ag	ents, 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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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