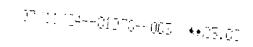
# L23000 229 194

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Certified Copies	Certificates of Status	-
Special Instructions to Filing	g Officer:	]





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#### **COVER LETTER**

**TO:** Registration Section Division of Corporations

SUBJECT: Julie Dietz Jones, Ed.D Ll	_C
Name of Limited Liability	Company
DOCUMENT NUMBER: L23000229194	
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.	~
Address	SEC TO
Austin, TX 78717	2024 JUL 11 SECRE VAL
City/State and Zip Code	
raresignations@legalzoom.com	100 P
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	r <sub>rai</sub> —
800	773-0888
Name of Person at (at (at 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

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	s of section 605.0115, Florida Statutes, t	he undersigned,	
United States Corpo	ration Agents, Inc.	, hereby resigns as	
	Name of Registered Agent		
Registered Agent for <u>Ju</u>	lie Dietz Jones, Ed.D LLC		
	Name of Limited Liability Company		
L23000229194			
Document Nur	nber, if known		
		liability company at its last known address.	filed:
	Erik Treutlen	in the second	
	Signature of Resigning	g Agent	
If signing on behalf of an	entity:	g Agent Grant	; <del>.</del>
	Erik Treutlein		
	Typed or Printed Name		
	Vice President on behalf of United States Corp	xoration Agents, 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