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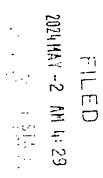
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### **COVER LETTER**

SUBJECT: BND Holdings LLC Name of Limited Liability Company DOCUMENT NUMBER: L23000427754 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

TO:

Registration Section Division of Corporations

# 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 Corporation Agents, Inc hereby		hereby resigns as			
		nerco, resigns as		~)	
Registered Agent for B	BND Holdings LLC			2024    167	
			•	5	T:
	Name of Limited Liability Company			2.	
L23000427754			2. T. - (2.)	H HM	
Document N	umber, if known		3.5	T: ~0	
A copy of this resignati	on was mailed to the above listed limited liability co	ompany at its last kno	own addi	ress.	
The agency is terminate	ed and the office discontinued on the 31st day after t	he date on which this	s stateme	ent is	filed.
	Signature of Resigning Agent				
If signing on behalf of a	an entity:				
	Cheyenne Moseley				
	Typed or Printed Name	<del></del>			
	Asst. Secretary for United States Corporation Ager	nts, 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