## L24000270655

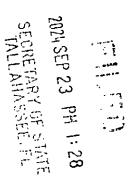
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## **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT: Zhen Yi Spa LLC  Name of Limited Liabilit	v Company
DOCUMENT NUMBER: L24000270655	y Company
The enclosed Resignation of Registered Agent for a Limite for filing.	d Liability Company and fee are submitted
Please return all correspondence concerning this matter to t	he following:
United States Corporation Agents, Inc.	
Name of Person	_
Legalzoom.com, Inc.	
Name of Firm/Company	TECH 24 SI
9900 Spectrum Dr.	-EP 2
Address	
Austin, TX 78717	ECRETARY SEE TA
City/State and Zip Code	28
raresignations@legalzoom.com	,,,
E-mail address: (to be used for future annual report notification)	_
For further information concerning this matter, please call:	
at (	773-0888
Name of Person Area Code	Daytime Telephone Number
Enclosed is a check made payable to the Florida Departmer liability company or \$25.00 for an administratively dissolve liability company.	nt of State for \$85.00 for an active limited ed. voluntarily dissolved or withdrawn limited
MAILING ADDRESS: STRE	ET ADDRESS:

Registration Section

Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

INHS17 (2/14)

P.O. Box 6327

Registration Section

Division of Corporations

Tallahassee, FL 32314

## STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ons of section 605.0115, Flori	da Statutes, the unders	iigned,	
United States Corporation Agents, Inc he		hereby resigns as		
Registered Agent for $\underline{Z}$	Zhen Yi Spa LLC			-
	Name of Limited Lia	bility Company		-'
L24000270655				
Document N	lumber, if known		. 2	
-			ompany at its last knowr address.	
The agency is terminate	ed and the office discontinued	I on the 31st day after	the date on which this statements	s filed.
		settlein ure of Resigning Agent		1: 29
If signing on behalf of	an entity:		713	٥
	Erik Treutlein			
	Typed or	Printed Name		
	Vice President on behalf of Uni	ted States Corporation Age	ents, Inc.	
	Сара	eity	<del></del>	

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Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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