M22000001671

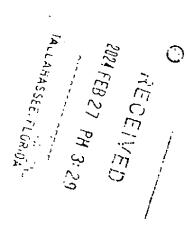
(F	Requestor's Name)	
	Address)	
(/	Address)	
((City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(6	Business Entity Name)	
(6	Document Number)	
Certified Copies	Certificates of S	Status
Special Instructions to F	iling Officer:	

Office Use Only



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FILED
2024 FEB 27 MM 9: 37
WHY ANASSEE, FLORIDA



CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195					
REFERENCE :					
AUTHORIZATION : SALERICA COST LIMIT : \$87.50					
COST LIMIT : \$87.50 25.00					
ORDER DATE : 02/27/2024					
ORDER TIME :					
ORDER NO. :					
CUSTOMER NO:					
Resignation CHANGE OF AGENT					
NAME: Zenani It LLC					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY PLAIN STAMPED COPY					
CONTACT PERSON: ALEXXIS WEILAND-SORENSON EXAMINER'S INITIALS:					

COVER LETTER

RESIGNATION DEPT 800 Name of Person Area Code	927-9801) Daytime Telephone Number
For further information concerning this matter, please call:	
E-mail address: (to be used for future annual report notification)	-
ANNUALREPORTS@CSCGLOBAL.COM	_
City/State and Zip Code	_
WILMINGTON, DE 19808	
Address	-
251 LITTLE FALLS DRIVE	
Name of Firm/Company	-
CORPORATION SERVICE COMPANY	
Name of Person	_
RESIGNATIONS DEPARTMENT	
Please return all correspondence concerning this matter to t	he following:
The enclosed Resignation of Registered Agent for a Limite for filing.	d Liability Company and fee are submitted
DOCUMENT NUMBER: M22000001671	
Name of Limited Liability	v Company
SUBJECT: Zenani lt LLC	
Division of Corporations	

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

TO: Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of se	ection 605.0115. Florida Statutes, t	he undersigned.	
CORPORATION SERVICE CO	MPANY	hereby resigns as	
Name	of Registered Agent		
Registered Agent for Zenani It	LLC		
	Name of Limited Liability Company		.
M22000001671			
Document Number, if	Known		
A copy of this resignation was	mailed to the above listed limited	liability company at its last known ad	dress.
The agency is terminated and t	he office discontinued on the 31st	day after the date on which this stater	nent is filed
	Wiland-Sary Signature of Resigning	1504, AVP	
If signing on behalf of an entity		B 1.50	
BY A	LEXXIS WEILAND-SORENSON	₹	22
	Typed or Printed Name]24
VICE	PRESIDENT	AT THE	
	Capacity	LAHASSE	12024 FEB 27
		נמיין	₹ IT
	FILING FEES: \$ 85.00 Active limited lia \$ 25.00 Administratively withdrawn limite	ability company dissolved/ voluntarily dissolved/	MH 9: 37

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314