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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: DEVELOP METRICS LLC	,
Name of Limited Liability DOCUMENT NUMBER: M2300002683	Company
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	
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:	
	773-0888 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 provisi	ons of section 605.0115, Florida Statutes, the unc	dersigned,			
United States Corporation Agents, Inc. Name of Registered Agent		, hereby resigns as			
		_ thereby resigns as			
Registered Agent for [DEVELOP METRICS LLC				_
	Name of Limited Liability Company				_,
M23000002683					
Document N	lumber, if known				
The agency is terminat	ed and the office discontinued on the 31st day aft Trick Truttlein Signature of Resigning Agent	·		ement	
If signing on behalf of	an entity:		77 T	024 ⁻	8
	Erik Treutlein		TALLAHASSEE	2024 DEC	
	Typed or Printed Name			ည်	Γ.
	Vice President on behalf of United States Corporation	Agents, Inc.	2S.C		111
	Capacity		FOR STATE	PM 4: 23	
	\$ 85.00 Active limited liability of Administratively dissolve withdrawn limited liability of Administratively and Administratively dissolve withdrawn limited liability.	ved/ voluntarily disso	olved/		

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