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STATE OF RHODE ISLAND  
STATEMENT OF RESIGNATION  
OF  
RESIDENT AGENT

Pursuant to the provisions of Section 7-16-11 of the Rhode Island Limited Liability Company Act, the undersigned resident agent, in order to resign as resident agent, hereby certifies that:

001658702

Charter Number

1. The name of the limited liability company is:

LABYRINTH INTERNATIONAL, LLC

2. The name of the resigning resident agent is:

Capitol Corporate Services, Inc.

3. The address of the resigning resident agent is:

222 Jefferson Blvd Ste 200

Address

Warwick

City

Rhode Island

State

02888

Zip code

4. A copy of this Statement of Resignation has been delivered or sent to the above stated limited liability company.

5. This resignation of resident agent shall become effective on the 31<sup>st</sup> day after the date on which this Statement of Resignation is filed with the office of the Rhode Island Secretary of State.

IN WITNESS WHEREOF, the undersigned resident agent has caused this Statement of Resignation to be signed on its behalf by its officer this 11 day of

January, 20 19.

Capitol Corporate Services, Inc.

Registered Agent

Signature



Jason Fischer

Name

Assistant Secretary

Title