

(R	lequestor's Name)				
(*)	,				
(A	ddress)				
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(0	City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL			
(E	Business Entity Name)	1			
(C	Ocument Number)				
Certified Copies	Copies Certificates of Status				
Special Instructions to	o Filing Officer:				
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COVER LETTER

SUBJECT:	Angel's	Touch Hous	e Cle	aning, LLC
	Name	of Limited Lia	bility	Company
DOCUMENT NUM	IBER:	L0900006	1234	
The enclosed Resign for filing.	ation of Registered A	gent for a Li	mited	Liability Company and fee are submitted
Please return all corr	espondence concerni	ng this matter	r to th	e following:
	Kaitie Sperry			
	Name of Person			
C	orporate Direct, Inc.			
N	ame of Firm/Company	<u>-</u>		
224	8 Meridian Blvd., S	te H		
	Address			
1	Minden, NV 89423			
C	ity/State and Zip Code			
info	@corporatedirect.c	om		
E-mail address: (to	be used for future annual	report notificat	ion)	
For further informati	on concerning this m	atter, please	call:	
Kaitie Sperry		77	5 ,	782-2201 Daytime Telephone Number
Name	e of Person	Area	Code	Daytime Telephone Number

MAILING ADDRESS:

liability company.

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 provision	s of section 605.0115, Flo	orida Statutes, the unde	rsigned,				
Gerri Detweiler Name of Registered Agent			, hereby resigns as				
Registered Agent for	Angel's Tou	uch House Cleanin	g, LLC				
	Name of Limited L	lability Company			·		
L09000	061234						
Document Nur	nber, if known						
	n was mailed to the above and the office discontinu		r the date on which t				
If signing on behalf of ar	Gerri Typed o Regist	Detweiler or Printed Name sered Agent spacity		17 OCT 10 PM 2: 11 SELSEINER OF SINTE TALLAHASSES FLORIDA	FILED		
	\$ 25.00 Ad	ES: tive limited liability co lministratively dissolve ithdrawn limited liabil	ed/ voluntarily disso	olved/			

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