## L18000156132

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(,,,
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
·
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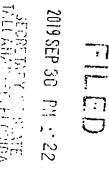
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## **COVER LETTER**

Registration Section Division of Corporations

TO:

	of Limited Liability Company	
DOCUMENT NUMBER: <u>L18000156</u>	32	
The enclosed Resignation of Registered Asubmitted for filing.	gent for a Limited Liability Company a	ind fee are
Please return all correspondence concerni	ng this matter to the following:	
United States Corporation Agents, Inc	<b>D</b> .	
Name of Person		
Legalzoom.com, Inc.		
Name of Firm/Company		
101 North Brand Blvd. 11th Floor		
Address	···	
Glendale, CA 91203		
City/State and Zip Code		
raresignations@legalzoom.com		
E-mail address: (to be used for future annua	report notification)	
For further information concerning this m	atter, please call:	
Kasandra Lund	at ( 1 800 ) 773-0888 x3951	
Name of Person	Area Code Davtime Telephone N	lumber

STREET ADDRESS:

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Registration Section

Clifton Building

INHS17 (2/14)

MAILING ADDRESS:

**Division of Corporations** 

Tallahassee, FL 32314

Registration Section

P.O. Box 6327

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

Pursuant to the provisi	ons of section 605.0115, Florida Statutes, the undersigned	ed.
United States Corp	poration Agents, Inc.	, hereby resigns as
	Name of Registered Agent	
Registered Agent for	THE CLEAN SCENE LLC	
	Name of Limited Liability Company	<del></del>
THE CLEAN SCEN	E LLC	
Document N	Jumber, if known	8
A copy of this resignat	tion was mailed to the above listed limited liability comp	any at its last known address.
The agency is terminate	ed and the office discontinued on the 31st day after the date	on which this statement is filed.
	Signature of Resigning Agent	
If signing on behalf of	an entity:	
	Cheyenne Moseley	
	Typed or Printed Name	<del></del>
	Asst. Secretary for United States Corporation Agents, Inc.	2.
	Capacity	<del>_</del>

\$85.00 Active limited liability company
\$25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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