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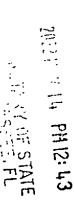
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COVER LETTER

SUBJECT: Name	e of Limited Liabilit	y Company
DOCUMENT NUMBER:		<u></u>
The enclosed Resignation of Registered for filing.	Agent for a Limite	d Liability Company and fee are submitte
Please return all correspondence concerr	ning this matter to	he following:
Chelsea Chapman		
Name of Person	-	_
Legaline Corporate Services, INC.		
Name of Firm/Company	3'	_
10601 Clarence Dr Ste 250		
Address	<u> </u>	_
Frisco, TX 75033-3867		
City/State and Zip Code		_
ra@legaline.com		
E-mail address: (to be used for future annua	al report notification)	_
For further information concerning this r	matter, please call:	
Chelsea Chapman	at (386-0178 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Registration Section Division of Corporations

TO:

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 provision	ns of section 605.011.	5, Florida Statutes, the unders	signed.		
Legaline Corporate Servi	ces, INC.		hereby resigns as		
Name of Registered Agent			, neredy resigns us		
Registered Agent for <u>F</u>	ILIPE MERCHAN	DISING LLC			
				·	
	Name of Lin	nited Liability Company			
L.21000402460	ımber, if known				
A copy of this resignation	on was mailed to the a	above listed limited liability co	ompany at its last known	address.	
The agency is terminate	d and the office disco	ntinued on the 31st day after t	the date on which this sta	itement is fil	t
If signing on behalf of a	n entity:	Matteust Signature of Resigning Agent	<u>~</u>		
<i>G G</i>	•	Zachary Mathewson			
		'yped or Printed Name	<u>.</u> .	. 183 183	
	On Behalf of Legalin	c Corporate Services, INC.		. 1	
		Capacity	- 1911 (S.S.	27 14 PM 12: 43	
	<u>FIL.ING</u> ⊚ \$ 85.00 ⊙ \$ 25.00	FEES: Active limited liability cor Administratively dissolved withdrawn limited liabilit	d/ voluntarily dissolve#	H 12: 43	C

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