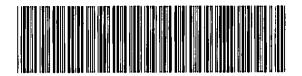
F95000004845

	
	(Requestor's Name)
	<u> </u>
	(Address)
	(Address)
	(· · · · · · · · · · · · · · · · · · ·
	(City/State/Zip/Phone #)
	(City/State/Zip/Prione #)
	P
	•
	(Business Entity Name)
	(Document Number)
	(Boodiness Hamber)
0.00.00	0 455-22-35 65-23-3
Certified Copies	Certificates of Status
Special Instructions	to Edina Officer:
Special matractions	to timing Officer
	1
	
	Office Use Only



900370281659

... All 9: 19

2021 AUG -9 PM 4: 16
DIVISION OF CORPORATIONS

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: BARNEY'S, INC.	
(Name of Corporat	ion)
DOCUMENT NUMBER: F95000004845	
The enclosed Resignation of Registered Agent for a Corpor	ration and fee are submitted for filing.
Please return all correspondence concerning this matter to t	he following:
RESIGNATION DEPARTMENT	
(Name of Person)	-
CORPORATION SERVICE COMPANY	
(Name of Firm/Company)	-
251 LITTLE FALLS DRIVE	
(Address)	-
WILMINGTON, DE 19808	
(City/State and Zip Code)	_
For further information concerning this matter, please call:	
RESIGNATION DEPARTMENT 800 at (927-9801
(Name of Person) (Area Code) & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

	ons 607.0503(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned	CORPORATION SERVICE COMPANY
Fronds Statutes, the undersighed,	(Name of Registered Agent)
hereby resigns as Registered Ager	BARNEY'S, INC.
neredy resigns as regimered riger	(Name of Corporation)
F9500000484 5	
(Document Number, if known)	
A copy of this resignation was ma	tiled to the above listed corporation at its last known address.
The agency is terminated and the this statement is filed.	office discontinued on the 31st day after the date on which
allexi	is Weibad,
	(Signature of Resigning Agent)
If signing on behalf of an entity:	
BY ALEXXIS WE	ILAND
	(Typed or Printed Name)
VICE PRESIDENT	
	(Capacity)

Fee for filing this document:

\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

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