

L070000092447

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

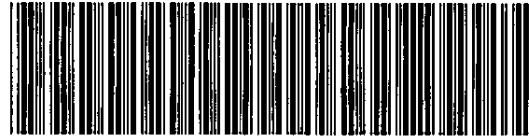
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700259089907

04/16/14--01025--020 **85.00

FILED
SECRETARY OF STATE
BY REG. CLERK DIVISION
14 APR 16 AM 9:59

RA/RES
@ 4.23.14

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Tailored Pet Sitting
Name of Limited Liability Company

DOCUMENT NUMBER: L0700092447

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Amber Liptak
Name of Person

Name of Firm/Company

10906 N. Blvd
Address

Tampa, FL 33612
City/State and Zip Code

Amberliptak@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Amber Liptak at (813) 317-0031
Name of Person Area Code 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

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 provisions of section 605.0115, Florida Statutes, the undersigned,

Amber Liptak, hereby resigns as
Name of Registered Agent

Registered Agent for Tailored Pet Sitting, LLC
Name of Limited Liability Company

L0700090447
Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

[Signature]
Signature of Resigning Agent

If signing on behalf of an entity:

Amber Liptak
Typed or Printed Name
MGRM
Capacity

FILING FEES:

\$ 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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 APR 16 PM 3:59

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

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

Amber Liptak, hereby resigns as
Name of Registered Agent

Registered Agent for Tailored Pet Sitting, LLC
Name of Limited Liability Company

LO700090447
Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

[Signature]
Signature of Resigning Agent

If signing on behalf of an entity:

Amber Liptak
Typed or Printed Name
MGRM
Capacity

FILING FEES:

\$ 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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 APR 16 PM 5:59