12000085584

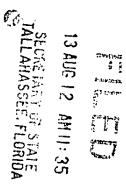
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COVER LETTER

Spice by Sandra LLC Name of Limited Liability Company DOCUMENT NUMBER: L12000085584 The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted Please return all correspondence concerning this matter to the following: Sandra H. List Name of Person Spice by Sandra, LLC Name of Firm/Company P.O. Box 2442 Address Windermere, Florida 34786 City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Sandra H. List 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

Amendment Section Division of Corporations

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

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	s of section 608.416(2) or 608.509, Florida Sta	tutes, the undersigned,	
Andrew C. Mitchell . hereby		_, hereby resigns as	
	Name of Registered Agent		
Registered Agent for S	pice by Sandra LLC		
·	Name of Limited Liability Company		
L12000085584			
Document Nur	nber, if known		
	n was mailed to the above listed limited liability and the office discontinued on the 31st day after Signature of Resigning Agent		iled.
If signing on behalf of an		13 AUG 12 SECTE INT TALLAHASS	* Emperor
	Typed or Printed Name		STATE OF
	Capacity	AH II: 35	

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\$ 25.00 Administratively dissolved/voluntarily dissolved/withdrawn limited liability company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