140000 48832

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COVER LETTER

SUBJECT: HAPPY FEET EARLY CHILDHOOD CENTER LLC Name of Limited Liability Company DOCUMENT NUMBER: L14000048832 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: United States Corporation Agents, Inc. 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 annual report notification) For further information concerning this matter, please call: Kasandra Lund 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

STREET ADDRESS:

2661 Executive Center Circle Tallahassee, FL 32301

Registration Section
Division of Corporations

Clifton Building

INHS17 (2/14)

P.O. Box 6327

MAILING ADDRESS: Registration Section

Division of Corporations

Tallahassee, FL 32314

TO: Registration Section

Division of Corporations

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ons of section 605.0115. Florida Statutes, the un	ndersigned.			
United States Corporation Agents, Inc.			, hereby resigns as		
Name of Registered Agent					
Registered Agent for_	HAPPY FEET EARLY CHILDHOOD CENTE	ER LLC			
	Name of Limited Liability Company				<u> </u>
1.14000048832					
Document N	dumber, if known				
A copy of this resignat	tion was mailed to the above listed limited liabil	lity company at its I	ast knov	vn add	Iress.
The agency is terminate	ed and the office discontinued on the 31st day after		his stater	nent is	s filed.
If signing on behalf of an entity:				19	
	Cheyenne Moseley		HA HA	AUG 2	77
	Typed or Printed Name		325	(A)	
	Asst. Secretary for United States Corporation A	gents, Inc.	7) <u>-</u>		T
	Capacity		r STAFÉ FLORIDA	PM 5: 33	Ö
	FILING FEES: \$ 85.00 Active limited liability (\$ 25.00 Administratively diss		Tissolve	d/	

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

withdrawn limited liability company