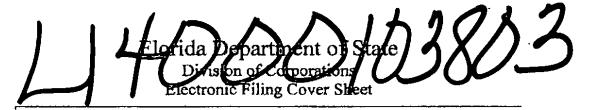
Division of Corporations

Page 1 of 2



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000183673 3)))



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Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : INCORPORATING SERVICES FL
Account Number : I20050000052
Phone : (850)656-7956
Fax Number : (850)656-7953

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:	

# LLC REGISTERED AGENT RESIGNATION JOYFUL JUICING LLC.

Certificate of Status	0
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Page Count	02
Estimated Charge	\$85.00

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JUL 17 2017

## **COVER LETTER**

h17000183673 3

TO:	Registration Section Division of Corporations
SUBJ	JOYFUL JUICING LLC
	Name of Limited Liability Company
DOCU	MENT NUMBER: L14000103803
The enfor fili	closed Resignation of Registered Agent for a Limited Liability Company and fee are submitted ag.
Please	return all correspondence concerning this matter to the following:
Tunis	na Scott
	Name of Person
INCO	RPORATING SERVICES, LTD.
	Name of Firm/Company
3500	SOUTH DUPONT HIGHWAY
	Address
DOVE	R, DE 19901
	City/State and Zip Code
FIND	V@INCSERV.COM
E-	nail address: (to be used for future annual report notification)
For fu	ther information concerning this matter, please call:
Tunis	Name of Person Area Code Daytime Telephone Number
	Name of Person Area Code Daytime Telephone Number
liabilit	ed is a check made payable to the Florida Department of State for \$85.00 for an active limited company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limit company.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

INH\$17 (2/14)

### h170001836733

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

j,

Pursuant to the provision	ons of section 605.0115, Florida Statutes	, the undersigned,
INCORPORATING	SERVICES, LTD.	hereby resigns as
	Name of Registered Agent	,,,
Registered Agent for _	JOYFUL JUICING LLC	
	Name of Limited Liability Compa	ny
L14000103803		
Document N	kunber, if known	
		st day after the date on which this statement is filed;
If signing on behalf of	an entity:	
	Tunisha Scott	
	Typed or Printed Name	±.
	ASSISTANT SECRETARY	
	Canacity	

#H.ING 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

INH\$17 (2/14)