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(Requestor's Name)	_
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(Address)	
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(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	
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(Document Number)	_
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Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	
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Office Use Only



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2804 Gateway Oaks Drive #100 Sacramento, CA 95833

Phone 888-272-3725 Fax 800-603-5868

REFERENCE # MUST BE ON INVOICE TO BE PAID

Date: September 10, 2020

Vendor# H1080

Florida Department of State

New Filing Section - Division of Corporations

PO Box 6327

Tallahassee, FL 32314

FAX:

TO:

EMAIL:

Cori Ann Crosthwaite AE:

ccrosthwaite@myparacorp.co Email:

Ref Number: 1493995

CHAMELEON COLLECTIVE NAME:

CONSULTING LLC

REGISTERED AGENT RESIGNATION FILING

State

FL

SPECIAL INSTRUCTIONS:

Requesting 1 plain copy

PLEASE EMAIL OR FAX A COPY OF RESULTS

Please return via: Regular Mail

RETURN TO: PARASEC - 2804 GATEWAY OAKS DRIVE #100 SACRAMENTO, CA 95833

CALL IMMEDIATELY IF YOU HAVE ANY QUESTIONS OR THE DEADLINE WILL NOT BE MET

888-272-3725

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ns of section 605.011	5, Florida Statutes, the unde	ersigned,			
Rocket Lawyer Corporate Services LLC			_ , hereby resigns as			
	Name of Registered Ager	nt				
Registered Agent for C	HAMELEON COL	LECTIVE CONSULTI	NG LLC	<u> </u>		-
	Numer of Live	nited Liability Company				بـ
	Name of this	med maomey company				
L15000132644						
Document Nu	mber, if known					
A copy of this resignation	on was mailed to the a	above listed limited liability	company at its last	known a	ddress	
The agency is terminated	d and the office disco	ontinued on the 31st day after Signature of Nesigning Agent		i this state	ement i	s mea.
If signing on behalf of a	n entity:					
	EDNA PERRY					
		'yped or Printed Name			20	
	Asst. Secretary	Rocket Lawyer Corpor	rate Servi	<u>.</u>	20 8	/# b
		Capacity		LARAS	1020 SEP 18	
	FILING \$ 85.00 \$ 25.00	FEES: Active limited liability of Administratively dissolve withdrawn limited liability.	'ed/ voluntarily dis	OF STATE	AM 10: 34	

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