L170000 24433

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(2-1), 2-1-1-2-1
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

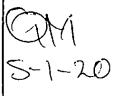




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2020 APR 20 PM 5: 02



COVER LETTER

. . . .

	f Limited Liabil	ity Company
DOCUMENT NUMBER: L1700002443	3	<u></u>
The enclosed Resignation of Registered Ag for filing.	gent for a Limit	ted Liability Company and fee are submitted
Please return all correspondence concernin	g 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	<u> </u>	_
Glendale, CA 91203		
City/State and Zip Code		_ _
raresignations@legalzoom.com		
E-mail address: (to be used for future annual	report notification	1)
For further information concerning this ma	itter, please cal	1:
Janna Pantoja	800 at /	773-0888 x3950 de Daytime Telephone Number
Name of Person	Area Co	de Daytime Telephone Number

MAILING ADDRESS:

Registration Section Division of Corporations

TO:

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 provision	ons of section 605.0115, Florida Statutes, the	undersigned,	
United States Corp	poration Agents, Inc.	_ , hereby resigns as	
	Name of Registered Agent		
Registered Agent for	Slammin' Jerky, LLC		
	Name of Limited Liability Company		
L17000024433			
Document?	Number, if known		
A copy of this resignat	tion was mailed to the above listed limited lia	bility company at its last k	tnown address.
The agency is terminat	ted and the office discontinued on the 31st da	ly after the date on which t	this statement is filed.
	all		
	Signature of Resigning z	Agent	202
If signing on behalf of	an entity:		्र शहरता हैते. 2020 APR 20
	Cheyenne Moseley		R 22
	Typed or Printed Name		0
	Asst. Secretary for United States Corporat	ion Agents, Inc.	P
	Capacity		5: 02

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