



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.

((H20000182334 3)))



H200001823343ABCX

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : GUZMAN & GUZMAN, P.A.
Account Number : 120080000090
Phone : (305) 670-1991
Fax Number : (305) 670-1993

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
BEAUTY SOURCING, L.L.C.**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$85.00

JUN 17 2020

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

2020 JUN 16 AM 9:21

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

GUZMAN & GUZMAN, P.A.

, hereby resigns as

Name of Registered Agent

Registered Agent for BEAUTY SOURCING, L.L.C.

Name of Limited Liability Company

L17000036147

Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

Signature of Resigning Agent

If signing on behalf of an entity:

ALBERTO GUZMAN

Typed or Printed Name

REGISTERED AGENT

Capacity

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\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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