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(Requestor's Name)		
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PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
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Branch Branch Carlo Garage

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COVER LETTER

SUBJECT: SWEET DREAMS HOME ALPACA, LLC Name of Limited Liability Company DOCUMENT NUMBER: L17000125514 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 Area Code Daytime Telephone Number Name of Person 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

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 provisi	ons of section 605.0115, Florida Statutes, the un	dersigned,
United States Corporation Agents, Inc.		, hereby resigns as
	Name of Registered Agent	
Registered Agent for	SWEET DREAMS HOME ALPACA, LLC	<u></u>
	Name of Limited Liability Company	
L17000125514		
Document N	fumber, if known	
A copy of this resignat	ion was mailed to the above listed limited liabili	ty company at its last known address.
The agency is terminate	d and the office discontinued on the 31st day after Signature of Resigning Agent	the date on which this statement is filed.
If signing on behalf of	an entity:	
	Cheyenne Moseley	S 2
	Typed or Printed Name	——————————————————————————————————————
	Asst. Secretary for United States Corporation Ag	gents, Inc.
	Capacity	gents, Inc. SECINC AHASSEE, FLATE company
	FILING FEES: \$ 85.00 Active limited liability of the second structured of the second structure of the	olved/ voluntarily dissolved/

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