117000167299

| (Requ | uestor's Name) | | | |
|---|------------------|-------------|--|--|
| (Addr | ress) | | | |
| | | | | |
| (Addi | ·ess) | | | |
| (City/ | /State/Zip/Phone | e #) | | |
| PICK-UP | MAIT | MAIL | | |
| (Rusi | iness Entity Nar | me) | | |
| (543) | moss entry Har | | | |
| (Doc | ument Number) | | | |
| Certified Copies | Certificates | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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C. GOLDEN MAY - 2 2019

COVER LETTER

| SUBJECT: HONOR YOUR BODY YOGA, | mited Liabilit | v Company |
|--|----------------|---|
| DOCUMENT NUMBER: L17000167299 | | |
| The enclosed Resignation of Registered Agent for filing. | for a Limite | d Liability Company and fee are submitted |
| Please return all correspondence concerning th | is matter to t | he following: |
| United States Corporation Agents, Inc. | | |
| Name of Person | 1- | - |
| Legalzoom.com, Inc. | | |
| Name of Firm/Company | | - |
| 9900 Spectrum Dr. | | |
| Address | · | - |
| Austin, TX 78717 | | |
| City/State and Zip Code | <u> </u> | - |
| | | |
| E-mail address: (to be used for future annual report | (notification) | - |
| For further information concerning this matter, | please call: | |
| Kasandra Lund | 1.800 | 773_0888 v3051 |

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

Name of Person

TO:

Registration Section Division of Corporations

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 provisio | ns of section 605.0115. Florida Statutes, the und | ersigned. | | | |
|--|---|------------------------|-----------|-------------|----------|
| United States Corporation Agents, Inc. Name of Registered Agent | | , hereby resigns as | | | |
| | | | | | |
| | Name of Limited Liability Company | | | | _• |
| L17000167299 | | | | | |
| Document N | umber, if known | | | | |
| A copy of this resignati | on was mailed to the above listed limited liability | company at its last k | enown a | iddress. | |
| The agency is terminate | ad and the office discontinued on the 31st day after the signature of Resigning Agent | er the date on which t | .his stat | | s filed. |
| If signing on behalf of a | in entity: | | • | 9 🗚 | x=365 |
| | Cheyenne Moseley | | : | 2019 APR 22 | 1 |
| | Typed or Printed Name | | | | |
| | Asst. Secretary for United States Corporation A | gents, Inc. | i. | - F | |
| | Capacity | | | PM 6: 07 | |

Active limited liability company
Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company

FILING FEES:

\$ 85.00 \$ 25.00