L17000253990

(Re	questor's Name)	
(Åde	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	:#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
		
Special Instructions to I	Filing Oπicer:	
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COVER LETTER

SUBJECT: Always Say A Prayer	Name of Limite	d Linkilia	Company
DOCUMENT NUMBER: L17000	tune of thinne	a 1.tability	Company
DOCUMENT NUMBER: 217 666			
The enclosed Resignation of Registor filing.	ered Agent for	a Limited	Liability Company and fee are submit
Please return all correspondence cor	ncerning this m	atter to th	e following:
Chelsea Cha	pman		
Name of Perso	n		
Legalinc Corporate Se	ervices, Inc.		
Name of Firm/Con	npany		
10601 Clarence Drive,	Suite 250		
Address			
Frisco, TX 7500	33		
City/State and Zip	Code		
E-mail address: (to be used for future	annual report not	ification)	
For further information concerning t	his matter, ple	ase call:	
Chelsea Chapman	at (844	386-0178 Daytime Telephone Number
Name of Person	(<u></u>	rea Code	Daytime Telephone Number

MAILING ADDRESS:

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 provisions	of section 605.0115, Florida Statutes, the un	dersigned,	
Legalinc Corporate Services, Inc.		, hereby resigns as	
-	Name of Registered Agent		
Registered Agent for	Always Say A Prayer LLC		
	Name of Limited Liability Company	·	
L170002	253990		
Document Num	ber, it'known		
•	Chelsea Chapman	, ,	
_	Typed or Printed Name	: :	
-	on Behalf of Legalinc Corporate Servi	ices, Inc.	
	FILING FEES: \$ 85.00 Active limited liability \$ 25.00 Administratively dissol withdrawn limited liab	company lved/ voluntarily dissolved/ ility company	

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