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(Re	equestor's Name)	
(Ad	idress)	
(Ac	dress)	
(Ci	ty/State/Zip/Phone	· #)
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(Bu	isiness Entity Nam	ne)
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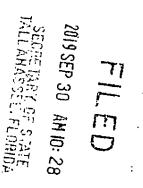
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COVER LETTER

TO: Registration Section Division of Corpor	
,	
SUBJECT: MY FAVOI	RITE HOLDINGS, LLC Name of Limited Liability Company
	• • •
DOCUMENT NUMBER	:
The enclosed Resignation submitted for filing.	of Registered Agent for a Limited Liability Company and fee are
Please return all correspon	dence concerning this matter to the following:
United States Corporati	on Agents, Inc.
Nam	e of Person
Legalzoom.com, Inc.	
Name of	Firm/Company
101 North Brand Blvd. 1	1th Floor
	Address
Glendale, CA 91203	
City/Stal	e and Zip Code
raresignations@legalzoom E-mail address: (to be use	.com d for future annual report notification)
For further information co	ncerning this matter, please call:
Kasandra Lund	at(1 800)773-0888 x3951
Name of Pe	rson Area Code Daytime Telephone Number
Enclosed is a check made liability company or \$25.0 limited liability company.	payable to the Florida Department of State for \$85.00 for an active limited 0 for an administratively dissolved, voluntarily dissolved or withdrawn
MAILING ADDRESS:	STREET ADDRESS:

Registration Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Registration Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ons of section 605.0115, Florida Statutes, the undersign	ned,
United States Corporation Agents, Inc.		. hereby resigns as
	Name of Registered Agent	
Registered Agent for _	MY FAVORITE HOLDINGS, LLC	· · · · · · · · · · · · · · · · · · ·
	Name of Limited Liability Company	·
MY FAVORITE HO	DLDINGS, LLC	
Document N	umber, if known	, ~2
	ion was mailed to the above listed limited liability com d and the office discontinued on the 31st day after the dat	至 9
The agency is seminate	Signature of Resigning Agent	- WHICH HIS SHEET OF 2
If signing on behalf of	an entity:	किस 🕉
	Cheyenne Moseley	
	Typed or Printed Name	
	Asst. Secretary for United States Corporation Agents, Ir	nc.
	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