118000060068

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only

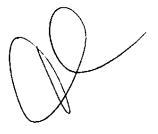


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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Shirt DNA, LLC		
Name of Limited Liability	y Company	
DOCUMENT NUMBER: L18000060068		
The enclosed Resignation of Registered Agent for a Limited for filing.	d Liability Company and fee are submit	tted
Please return all correspondence concerning this matter to the	he following:	
United States Corporation Agents, Inc.		
Name of Person	-	
Legalzoom.com, Inc.		
Name of Firm/Company		
9900 Spectrum Dr.	2022 NOV 1 4	
Address		- Constants
Austin, TX 78717		
City/State and Zip Code	SSEELEL FL	
raresignations@legalzoom.com	FA C	<u>သ</u>
E-mail address: (to be used for future annual report notification)	•	
For further information concerning this matter, please call:		
at (773-0888	
Name of Person Area Code	Daytime Telephone Number	

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 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 provision	ns of section 605.011	5, Florida Statutes, the unde	ersigned.			
United States Corporation Agents, Inc.		, hereby resigns as				
Name of Registered Agent						
Registered Agent for sh	nirt DNA, LLC					
						,
	Name of Lin	nited Liability Company				
L18000060068						
Document Nu	mber, if known					
A copy of this resignation	on was mailed to the	above listed limited liability	company at its last k	enown ad	dress.	
The agency is terminated	d and the office disco	ontinued on the 31st day after	er the date on which t	his staten	nent is	filed.
		Signature of Resigning Agent				
If signing on behalf of a	n entity:					
	Cheyenne Moseley				202	
	T	Typed or Printed Name		<u> </u>	2022 NOV 1 L	
	Asst. Secretary for United States Corporation Agents, Inc.		gents, Inc.	,	V	- F
		Capacity		爱	F	i de la compa
				SAL Min	AM	
				را المالية. المالية	8: 40	
	FILING \$ 85.00 \$ 25.00	Active limited liability of Administratively dissolv withdrawn limited liabi	ompany /ed/ voluntarily disso lity company	olved/	6	

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