## L18000080539

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





200343144662

04/20/20--01008--036 \*\*25.00

TOTAL TOTAL



## **COVER LETTER**

Name of Limited Liability	Company
DOCUMENT NUMBER: L18000080539	
The enclosed Resignation of Registered Agent for a Limited for filing.	Liability Company and fee are submitted
Please return all correspondence concerning this matter to the	ne 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:	
Janna Pantoja 800	773-0888 x3950 ) Daytime Telephone Number
Name of Person Area Code	Daytime Telephone Number

MAILING ADDRESS:

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 provision	ons of section 605.0115. Florida Statutes, the uno	dersigned.
United States Corp	poration Agents, Inc.	_ , hereby resigns as
,	Name of Registered Agent	Hereby resigns as
Registered Agent for $\frac{N}{2}$	Molto Bene Catering, LLC	
	Name of Limited Liability Company	
L18000080539		
Document N	umber, if known	
A copy of this resignati	on was mailed to the above listed limited liabilit	y company at its last known address.
The agency is terminate	ed and the office discontinued on the 31st day af	ter the date on which this statement is filed.
	Signature of Resigning Agent	
If signing on behalf of a	in entity:	2020 APR 20
	Cheyenne Moseley	PR
	Typed or Printed Name	20
	Asst. Secretary for United States Corporation A	Agents, Inc.
	Capacity	1:51

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

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withdrawn limited liability company

**FILING FEES:** 

\$ 85.00 \$ 25.00