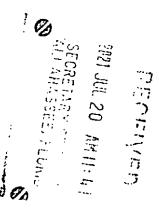
L18000082827

(December 1)	
(Requestor's Name)	
(Address)	
(Address)	
(100.000)	
(City/State/Zip/Pnone	#)
PICK-UP WAIT	MAIL
(Business Entity Name	a)
(Dusitess Chity Natio	=)
(Document Number)	
Certified Copies Certificates of	of Status
Special Instructions to Filing Officer:	

Office Use Only





CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195
REFERENCE : 918945 8323810
AUTHORIZATION :
COST LIMIT : 75 85.00
ORDER DATE : July 20, 2021
ORDER TIME : 10:57 AM
ORDER NO. : 918945-005
CUSTOMER NO: 8323810
RESIGNATION OF REGISTERED AGENT
NAME: THE ALMIGHTY DNA, LLC
XX RESIGNATION OF REGISTERED AGENT
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Unassigned-EXT#
EXAMINER'S INITIALS:

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJ	THE ALMIGHTY DNA. LLC Name of Lin	nited Liability	/ Company
DOC	UMENT NUMBER: 1.18000082827		
The e	nclosed Resignation of Registered Agenting.	for a Limite	d Liability Company and fee are submitted
Please	return all correspondence concerning thi	s matter to t	he following:
RESIG	NATIONS DEPARTMENT		
	Name of Person		-
CORP	ORATION SERVICE COMPANY		
	Name of Firm/Company		-
251 LI	TTLE FALLS DRIVE		
	Address		-
WILM	INGTON, DE 19808		
-	City/State and Zip Code		-
ANNU	ALREPORTS@CSCGLOBAL.COM		
E	-mail address: (to be used for future annual report	notification)	-
For fu	rther information concerning this matter.	please call:	
RESIG	NATION DEPT	800	927-9801
-	Name of Person	Area Code	927-9801 Daytime Telephone Number
Enclos	sed is a check made payable to the Florida	. Denartmen	t of State for \$85.00 for an active limited

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee. FL 32303

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the prov	isions of section 605.0115, Florida Statutes, the ur	ndersigned,	
CORPORATION SE	RVICE COMPANY	, hereby resigns as	
	Name of Registered Agent	Hereby resigns us	
Registered Agent for	THE ALMIGHTY DNA. LLC		_
	Name of Limited Liability Company		_•
L18000082827			
Documer	t Number, if known		
A copy of this resign	nation was mailed to the above listed limited liabil	ity company at its last known address.	
The agency is terming	nated and the office discontinued on the 31st day a	fter the date on which this statement is	s filed.
	Eyling Bahrel Signature of Resigning Ages	ر	
	Signature of Resigning Age	nt	
If signing on behalf	of an entity:	2021 JUL 20 SECRETAR) TALLAHA	
	BY EYLIENA BAKER		
	Typed or Printed Name	20	[51227
	VICE PRESIDENT		m
	Capacity	- 12 3 3 3 5 6 8 8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	Ö

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