L18000150756

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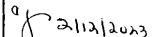
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COVER LETTER

TO: Registration Section Division of Corporations

SNEAKIES BEAUTY AND BOXES LLC SUBJECT:	
Name of Limited Liabi	lity Company
DOCUMENT NUMBER: L18000150756	
The enclosed Resignation of Registered Agent for a Lim for filing.	ited Liability Company and fee are submitted
Please return all correspondence concerning this matter to	o the following:
Chelsea Chapman	
Name of Person	_
Legaline Corporate Services, INC.	
Name of Firm/Company	_
10601 Clarence Dr Ste 250	
Address	_
Frisco, TX 75033-3867	
City/State and Zip Code	_
ra@legalinc.com	
E-mail address: (to be used for future annual report notification	<u>n)</u>
For further information concerning this matter, please cal	II:
Chelsea Chapman 844 at (386-0178
Name of Person Area Co	de ['] 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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
The Centre of Tallahassee
2415 N. Monroc Street, Suite 810
Tallahassee, FL 32303

INHS17 (2/14)

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi-	ons of section 605.0115, Florida Statutes, th	ne undersigned,	
Legaline Corporate Serv	rices, INC.	, hereby resigns as	
	Name of Registered Agent		
Registered Agent for	SNEAKIES BEAUTY AND BOXES LLC		
	Name of Limited Liability Company		,
L18000150756			
Document N	lumber, if known		
A copy of this resignat	ion was mailed to the above listed limited li	iability company at its last known addr	ress.
The agency is terminat	ed and the office discontinued on the 31st d		
If signing on behalf of	an entity:	TALL TALL	7022 NOV 15
	Chelsea Chapman		
	Typed or Printed Name	Ur [†]	175
	On Behalf of Legalinc Corporate Services,	INC.	P
	Capacity		PH 12: 34

FILING FEES:

O \$ 85.00 Active limited liability company
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