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(Re	questor's Name)		
(Ãd	dress)		
(Ad	dress)		
(Cit	ry/State/Zip/Phone	e #)	
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(Document Number)			
Certified Copies	_ Certificates	s of Status	
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2020 JAN 14 PH 5: 53

C. GOLDEN

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: CANNON NUTRITIC	ON LLC
N	lame of Limited Liability Company
DOCUMENT NUMBER: <u>L18000</u>	233491
The enclosed Resignation of Register submitted for filing.	red Agent for a Limited Liability Company and fee are
Please return all correspondence cond	cerning this matter to the following:
United States Corporation Agents	s, Inc.
Name of Person	i
Legalzoom.com, Inc.	
Name of Firm/Comp	pany
101 North Brand Blvd. 11th Floor	
Address	
Glendale, CA 91203	
City/State and Zip C	Code
raresignations@legalzoom.com E-mail address: (to be used for future a	innual report notification)
For further information concerning th	nis matter, please call:
Kasandra Lund	at (1 800) 773-0888 x 3951
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 provis	ions of section 605.0115, Florida Statutes, the undersigne	d.	
United States Corporation Agents, Inc.		, hereby resigns as	
	Name of Registered Agent		
Registered Agent for_	CANNON NUTRITION LLC		
	Name of Limited Liability Company		
L18000233491			
Document ?	Sumber, if known		
A copy of this resigna	tion was mailed to the above listed limited liability comp.	any at its last known address.	
The agency is terminate	ed and the office discontinued on the 31st day after the date	on which this statement is filed.	
	CM		
	Signature of Resigning Agent		
If signing on behalf of an entity:		نت. پ	
Cheyenne Moseley		1 2020 J.E., 14	
	Typed or Printed Name		
	Asst. Secretary for United States Corporation Agents, Inc.	PH 5:	
	Capacity	2.	
		သ်	

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