# L18000250370

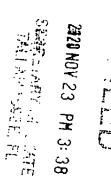
(Re	equestor's Name)			
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PICK-UP	MAIT	MAIL		
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Certified Copies	Certificates	of Status		
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## **COVER LETTER**

SUBJECT: Anna's Organic Soap LLC  Name of Limited Liability Company	
DOCUMENT NUMBER: L18000250370	
The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are substortiling.	mitted
Please return all correspondence concerning this matter to the 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:	
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

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 provisio	ns of section 605.0115	. Florida Statutes, the under	signed.
United States Corp	oration Agents, Inc	<b>S</b> .	hereby resigns as
	Name of Registered Agent		nerecy resigns as
Registered Agent for A	nna's Organic Soa	p LLC	
	Name of Limit	ted Liability Company	
L18000250370			23 P
Document No	imber, if known	<del></del>	が <b>エ                                   </b>
A copy of this resignation	on was mailed to the al	pove fisted limited liability c	ompany at its last known address.
The agency is terminate	d and the office discon	tinued on the 31st day after	the date on which this statement is filed.
		Surflure of Resigning Agent	
If signing on behalf of a	n entity:		
	Cheyenne Mosel	еу	
	Гу	ped or Printed Name	
	Asst. Secretary for Ur	nited States Corporation Age	ents, Inc.
		Capacity	
	<u>FILING 1</u> \$ 85.00 \$ 25.00	FEES: Active limited liability cor Administratively dissolved withdrawn limited liabilit	M/voluntarily/dissolved/

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