

L19000025654

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

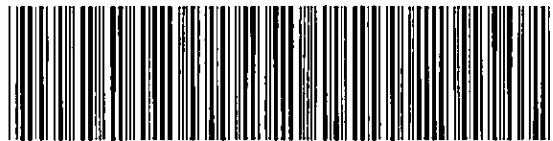
(Business Entity Name)

(Document Number)

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2024 OCT 21 PM 12:56

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CD BEAUTY, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L19000025654

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Tiffany Gonzalez
Name of Person

Accounting to Scale Inc
Name of Firm/Company

8055 Coral Way
Address

Miami, FL 33155
City/State and Zip Code

tiffany@accountingtoscale.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tiffany Gonzalez at (305) 503-2814
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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
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 provisions of section 605.0115, Florida Statutes, the undersigned,

Accounting to Scale Inc

, hereby resigns as

Name of Registered Agent

Registered Agent for CD BEAUTY, LLC

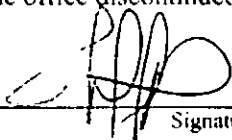
Name of Limited Liability Company

L19000025654

Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.


Signature of Resigning Agent

If signing on behalf of an entity:

TIFFANY GONZALEZ
Typed or Printed Name
PRESIDENT
Capacity

2023 OCT 21 PM 12:56
FILED
CLERK OF COURT
TALLAHASSEE, FLORIDA

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