# L19000065441

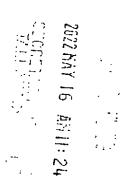
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
_
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
0
Special Instructions to Filing Officer:





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Ra Resignation

### **COVER LETTER**

Rupee's Pets LLC	
SUBJECT: Name of Limited Li	iability Company
DOCUMENT NUMBER: L19000065441	
The enclosed Resignation of Registered Agent for a Lifer filing.	imited Liability Company and fee are submitted
Please return all correspondence concerning this matte	er to the following:
United States Corporation Agents, Inc.	
Name of Person	
Legalzoom.com, Inc.	
Name of Firm/Company	
9900 Spectrum Dr.	
Address	
Austin, TX 78717	
City/State and Zip Code	202
raresignations@legalzoom.com	2022 HAY
E-mail address: (to be used for future annual report notificat	tion)
For further information concerning this matter, please	
800	call:  773-0888
	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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

TO:

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 provision	ns of section 605.0115, Florida Statutes, the unders	igned.	
United States Corporation Agents, Inc.		, hereby resigns as	
	Name of Registered Agent	meroo, realgile de	
Registered Agent for $\frac{R}{R}$	upee's Pets LLC	<del></del>	
	Name of Limited Liability Company	,	
L19000065441			
Document Nu	imber, if known		
A copy of this resignation	on was mailed to the above listed limited liability c	ompany at its last known address.	
The agency is terminate	d and the office discontinued on the 31st day after  Signature of Resigning Agent		led.
If signing on behalf of a	n entity:	)22 h	
	Cheyenne Moseley	2022 HAY 16	• •
	Typed or Printed Name		:
	Asst. Secretary for United States Corporation Age	nts, Inc.	,
	Capacity	24	Same.

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