L19000137646

(Re	equestor's Name)			
(Ac	ldress)			
(Ac	ldress)			
(Cit	ty/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
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COVER LETTER

Nam	e of Limited Liabili	y Company	
DOCUMENT NUMBER: L19000137	646		
The enclosed Resignation of Registered for filing.	Agent for a Limite	ed Liability Company and fee are su	bmitte
Please return all correspondence concert	ning this matter to	the following:	
United States Corporation Agents, In	nc.		
Name of Person			
LegalZoom.com, Inc.			
Name of Firm/Compan	y	_	
101 North Brand Blvd. 11th Floor			
Address		_	
Glendale, CA 91203			
City/State and Zip Cod	<u> </u>	_	
raresignations@legalzoom.com			
E-mail address: (to be used for future annu	al report notification)	_	
For further information concerning this	matter, please call		
Joyce Yi	at (773-0888 x7789 Daytime Telephone Number	
Name of Person	Ärea Cod	Daytime Telephone Number	

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

4NHS17 (2/14)

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY WOOD ON 122A RHY4: 55

SECRETARY OF STATE TALLAHASSEE, FL

Pursuant to the provisi	ons of section 605.0115. Florida St	atutes, the undersigned,
United States Cor	poration Agents, Inc.	, hereby resigns as
	Name of Registered Agent	
Registered Agent for 1	PEACEFUL HEART COUNS	ELING LLC
	Name of Limited Liability C	'ompany
L19000137646		
Document ?	Sumber, if known	
A copy of this resignat	ion was mailed to the above listed	imited liability company at its last known address.
The agency is terminat	\mathcal{O}	ne 31st day after the date on which this statement is filed Resigning Agent
lf signing on behalf of	an entity:	
	Cheyenne Moseley	
	Typed or Printed	Name
	Asst. Secretary for United States	Corporation Agents, Inc.
	Capacity	

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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