L19000172571

Office Use Only



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22 JUN -7 AM 9:





2804 Gateway Oaks Drive #100 Sacramento, CA 95833

Phone 888-272-3725 Fax 800-603-5868

REFERENCE # MUST BE ON INVOICE TO BE PAID

Date: May 20, 2022

1960

Florida Department of State

Division of Corporations PO Box 6327

Tallahassee, FL 32314

FAX:

Vendor#

TO:

850-687-6381

EMAIL:

Cori Ann Crosthwaite

IEmail:

ccrosthwaite@myparacorp.com

Ref Number:

1793545

Return Shipping:

MARTINS ENCHANTED CATERING LLC NAME:

FILE REGISTERED AGENT RESIGNATION

State

FL

PLEASE EMAIL OR FAX A COPY OF RESULTS

If the document is black and white, please return it to via e-mail and regular mail. If the document has color or any raised seals, please send it via:

CALL IMMEDIATELY IF YOU HAVE ANY QUESTIONS OR THE DEADLINE WILL NOT BE MET 888-272-3725

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ons of section 605.0115,	Florida Statutes, the under	signed,			
ROCKET LAWYER CORPORATE SERVICES LLC			, hereby resigns as			
	Name of Registered Agent					
Registered Agent for _	MARTINS ENCHAR	NTED CATERING LLC	<u>:</u>			
	Name of Limit	ed Liability Company				,
L19000172571	umber, if known	<u> </u>				
A copy of this resignati	on was mailed to the ab	ove listed limited liability of	company at its last kr	10wn ad	idress.	
The agency is terminate	ed and the office discon	tinued on the 31st day after	the date on which th	is stater	nent is	filed.
	Salma Wy	Signature of Resigning Agent				
If signing on behalf of	an entity:					
	EDNA PERRY			200	2027	
	Тур	ped or Printed Name			2022 JUN -7	777
	Asst. Secretary Rocket	Lawyer Corporate Services I	LLC	<u>≻</u>	22	economics of
		Capacity		ASS	7	
	FILING F \$ 85.00 \$ 25.00	EES: Active limited liability co Administratively dissolve withdrawn limited liabilit	mpany d/ voluntarily dissol ⁱ ty company	SEE, FL ved/	AM 9: 18	

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