

L19 000 233 426

(Requestor's Name)

(Address)

(Address)

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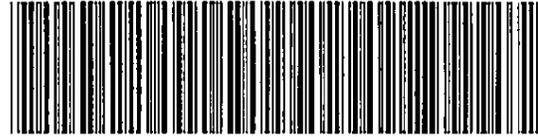
(Business Entity Name)

(Document Number)

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22 OCT 13 AM 5:01

UNITED STATES
DEPARTMENT OF JUSTICE
FEDERAL BUREAU OF INVESTIGATION

**STATEMENT OF RESIGNATION OF REGISTERED AGENT
FOR A LIMITED LIABILITY COMPANY**

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned.

United States Corporation Agents, Inc. _____, hereby resigns as

Name of Registered Agent

Registered Agent for Lillyannas Bridal LLC

Name of Limited Liability Company

L19000233416

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:

Cheyenne Moseley

Typed or Printed Name

Ass. Secretary for United States Corporation Agents, Inc.

Capacity

22 OCT 13 AM 5:01

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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withdrawn limited liability company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