L19000286314

(Re	questor's Name)			
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COVER LETTER

SUBJECT: BeeHairy LLC
Name of Limited Liability Company
DOCUMENT NUMBER: L19000286314
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:
United States Corporation Agents, Inc.
Name of Person
Legalzoom.com, Inc.
Name of Firm/Company
101 North Brand Blvd. 11th Floor
Address
Glendale, CA 91203
City/State and Zip Code
raresignations@legalzoom.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (800 773-0888 Area Code Daytime Telephone Number
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

TO: Registration Section Division of Corporations

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, F	lorida Statutes, the undersi	gned,	
United States Corpo	oration Agents, Inc.	3 .	nereby resigns as	
	Name of Registered Agent	, ,	icreby resigns as	
Registered Agent for Be	eeHairy LLC			
<u></u>				
	Name of Limited	Liability Company		====, ====,
L19000286314				1
Document Number, if known A copy of this resignation was mailed to the above listed limited liability company at its last			77	
A copy of this resignation	n was mailed to the abo	ve listed limited liability co	mpany at its last known a	ddress
The agency is terminated	d and the office discontin	nued on the 31st day after t	he date on which this state	ement is filed.
	St	gnature of Resigning Agent		
If signing on behalf of a	ı entity:			
	Cheyenne Moseley			
	Турсо	d or Printed Name		
	Asst. Secretary for United States Corporation Agents, Inc.		its, Inc.	
	(Capacity		
	\$ 25.00 A	ES: Active limited liability com Administratively dissolved, withdrawn limited liability	/ voluntarily dissolved/	

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