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| (Re | questor's Name) | |
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| (Ad | dress) | |
| (Cit | ry/State/Zip/Phone | #) |
| PIÇK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Name | e) |
| (Document Number) | | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to Filing Officer: | | |
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Office Use Only



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COVER LETTER

| The Kindness Initiative LLC SUBJECT: | | |
|--|---------------------------------------|---|
| SUBJECT: Name of Limit | ed Liability | Company |
| DOCUMENT NUMBER: L20000019361 | | |
| The enclosed Resignation of Registered Agent fo for filing. | r a Limited | Liability Company and fee are submitted |
| Please return all correspondence concerning this | matter to the | e 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 n | otification) | |
| For further information concerning this matter, p | lease call: | |
| at (| 800 | 773-0888 |
| Name of Person | Area Code | Daytime Telephone Number |

MAILING ADDRESS:

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 provisions of section 605.0115. Florida Statutes, the und | ersigned. |
|---|--------------------------------------|
| United States Corporation Agents, Inc. | _ , hereby resigns as |
| Name of Registered Agent | 14.7 14.7 |
| Registered Agent for The Kindness Initiative LLC | |
| | |
| Name of Limited Liability Company | 2½2 13 5 15 |
| L20000019361 | · <u></u> |
| Document Number, if known | *. É |
| A copy of this resignation was mailed to the above listed limited liability | y company at its last known address. |
| The agency is terminated and the office discontinued on the 31st day aft | |
| If signing on behalf of an entity: | |
| Cheyenne Moseley | |
| Typed or Printed Name | |
| Asst. Secretary for United States Corporation A | gents, Inc. |
| Capacity | |

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

FILING FEES:
\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

Tallahassee, FL 32314