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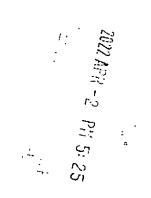
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Special Instructions to F	Filing Officer:	
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O SIMMONS
MAY 25 2021

COVER LETTER

SUBJECT: Paquet Consulting LLC	
Name of Limited Liability	Company
DOCUMENT NUMBER: L20000068580	
The enclosed Resignation of Registered Agent for a Limited for filing.	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 notification)	
For further information concerning this matter, please call:	
800 at (773-0888
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

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

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Limited Chata Consultation Asset 1		7°
United States Corporation Agents, Inc.	, hereby resigns as	TO THE
Name of Registered Agent		-2
Registered Agent for Paquet Consulting LLC		P
	_	તાં
Name of Limited Liability Company		
L20000068580		
Document Number, if known		
A copy of this resignation was mailed to the above listed limited lia	ability company at its last know	n address.
The agency is terminated and the office discontinued on the 31st da	ay after the date on which this s	statement is t
	,	

If 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