## L200000085090

(Requestor's Name)
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(Document Number)
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## **COVER LETTER**

SUBJECT: Nan	ne of Limited Liability	Company
DOCUMENT NUMBER: L2000008	5090	
The enclosed Resignation of Registered for filing.	Agent for a Limited	f Liability Company and fee are submitte
Please return all correspondence concer	ming this matter to the	ne following:
United States Corporation Agents,	Inc.	
Name of Person		-
Legalzoom.com, Inc.		
Name of Firm/Compar	ny	-
101 North Brand Blvd. 11th Floor		
Address		-
Glendale, CA 91203		
City/State and Zip Coc	le	
raresignations@legalzoom.com		
E-mail address: (to be used for future annual	ual report notification)	•
For further information concerning this	matter, please call:	
	800 au (	773-0888 Daytime Telephone Number
Name of Person	Area Code	Daytime Telephone Number

liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Pursuant to the provisions of section 605,	0115, Florida Statutes, the undersi	gned.	
United States Corporation Agents	, Inc.	sunder a si con a	
Name of Registered	Agent	ereby resigns as	
Registered Agent for Hero Pet Prints	LLC		
Name of	Limited Liability Company		
L20000085090			
	<del></del>		
Document Number, if known			
A copy of this resignation was mailed to t	he above listed limited liability cor	apany at its last known address.	
The agency is terminated and the office di	scontinued on the 31st day after th	e date on which this statement is	filed
	Signature of Resigning Agent		
f signing on behalf of an entity:			
Cheyenne Mo	oseley		
	Typed or Printed Name	<del></del>	
Asst. Secretary for	or United States Corporation Agents	s, Inc.	
	Capacity	,	
		· 2: 54	
FILE	G FEES;	.5	
\$ 85.0 \$ 25.0	O Active limited liability comp	oluntarily dissolved/	

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, F1, 32314