# L20000122801

Office Use Only



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RA Risignation

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### COVER LETTER

SUBJECT: T.D.J. ESSENTIALS LLC			<del> </del>
	Limited Liabili	iy Company	
DOCUMENT NUMBER: 1.20000122801			
The enclosed Resignation of Registered Age for filing.	nt for a Limit	ed Liability Company	and fee are submitted
Please return all correspondence concerning	this matter to	the following:	
Ryan Potter			
Name of Person		<del></del>	
ZenBusiness Inc.			
Name of Firm/Company			
336 E. College Ave. Suite 301			
Address	<del></del>		
Tallahassee, FL 32301			202
City/State and Zip Code	·	<del></del>	ورسي من أسالية والمساورة والمساورة
RA@zenbusiness.com			
E-mail address: (to be used for future annual rep	ort notification)	<del></del>	3°+€ 7°W
For further information concerning this matter	er, please call	:	100 G
Ryan Potter	844 at (	493-6249	7.7

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 P.O. Box 6327 Tallahassee, FL 32314

Name of Person

Registration Section Division of Corporations

TO:

#### **Street Address:**

Area Code Daytime Telephone Number

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

Pursuant to the provision	ons of section 605.0115, Florida Statutes, the	e undersigned.		
REGISTERED AGENT	S INC.	, hereby resigns as		
	Name of Registered Agent			
Registered Agent for _	DJ. ESSENTIALS LLC		_	
Name of Limited Liability Company				
1.20000122801				
Document N	lumber, if known			
	ion was mailed to the above listed limited lia ed and the office discontinued on the 31st da	*		
If signing on behalf of	Signature of Resigning A	Agent 6	2023 BAR 10	•: ]
it signing on tenan or	•	:	1 3	F 7.4
	Registered Agents Inc. by David Roberts		10	117
	Typed or Printed Name  Assistant Secretary  Capacity		FR 3:	1
		<u></u>	5	

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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