L20000125448

(Requestor's Name) (Address) (Address)		
(Address)		
(Address)		
(
(Cit. (Cha (7)- (Cha 40)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		





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07/11/22--01037--025 **25.00

2022 JUL 11 PM 2: 14

OCT 1 2 2022 S. PRATHEF

COVER LETTER

SUBJECT: Heather Tabers Ink LLC Name of Limited Liability Company				
				DOCUMENT NUMBER: L20000125448 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				
_egalzoom.com, Inc.				
Name of Firm/Company				
9900 Spectrum Dr.				
Address				
Austin, TX 78717				
City/State and Zip Code				
aresignations@legalzoom.com				
E-mail address: (to be used for future annual report notification)				
or further information concerning this matter, please call:				
800 773-0888				
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Pursuant to the provision	ons of section 605.0115, Florida Statutes, the u	ndersigned,	
United States Corporation Agents, Inc.		_ , hereby resigns as	
	Name of Registered Agent		
Registered Agent for _	leather Tabers Ink LLC		
	Name of Limited Liability Company	,	
L20000125448			
Document N	umber, if known		
.,	on was mailed to the above listed limited liabi		
The agency is terminate	Signature of Resigning Age		
If signing on behalf of a	an entity:	2022 JUL 11 PH 2:	
	Cheyenne Moseley		
	Typed or Printed Name		
	Asst. Secretary for United States Corporation	Agents, Inc.	
	Capacity	2: Tr	

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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