L20000173676

(Req	uestor's Name)	
	lress)	
(Add	11033)	
(Add	ress)	
(City	/State/Zip/Phon	e #)
PICK-UP	TIAW	MAIL
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(Doc	cument Number)	
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COVER-LETTER

TO: Registration Section Division of Corporations

SUBJECT: LIONS ARK CONSULTING LLC	
Name of Limited Liability	Company
DOCUMENT NUMBER: L200000173676	
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	ne following:
Chelsea Chapman	
Name of Person	
Legaline Corporate Services, INC.	
Name of Firm/Company	
10601 Clarence Dr Ste 250	
Address	
Frisco, TX 75033-3867	
City/State and Zip Code	
ra@legalinc.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Chelsea Chapman 844 at (386-0178
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 P.O. Box 6327 Tallahassee, FL 32314

Street Address:

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

INHS17 (2/14)

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Legaline Corporate Serv	rices INC			
Tæganne Corporate Serv	Name of Registered Age		_ , hereby resigns as	
Registered Agent for _	LIONS ARK CONSULT	ING LLC		
				<u></u>
	Name of Lin	nited Liability Company		
L20000173676				
	lumber, if known			
A copy of this resignat	ion was mailed to the	above listed limited liability	company at its last kno	own address.
The agency is terminate	ed and the office disco	ontinued on the 31st day after	er the date on which thi	s statement is filed
The agency is terminal	\sim 1.			
	/ X /	1		
		Signature of Resigning Agent		
		Digitatare of Itesspining (1841)		
If signing on behalf of	an entity:			
	Chelsea Chapman			
	T	yped or Printed Name		
	On Behalf of Legalin	c Corporate Services, INC.		
		Capacity		
	<u>FILING</u>	FEES:		
	⊙ \$ 85.00 ⊙ \$ 25.00	Active limited liability of Administratively dissolv	ompany yed/ voluntarily dissolv	red/
	O \$ 25.00	withdrawn limited liabil	lity company	S S
				2022 NOV 15 SECRETARY TALLAHASSE
				ARE 80
	Make checks navah	ble to Florida Department of	State and mail to:	V I
	reason and some beat ser	Division of Corporations		25.55 2.55 2.55 2.55 3.55 3.55 3.55 3.55
		P.O. Box 6327		(u, c)

Tallahassee, FL 32314

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