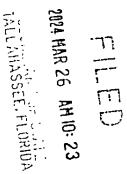
## L20000215398

(F	Requestor's Name)	<u></u>
· · · · · · · · · · · · · · · · · · ·	Address)	,
(A	Address)	
(0	City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(E	Business Entity Name)	
(E	Document Number)	
Certified Copies	Certificates of	Status
Special Instructions to Fi	iling Officer:	

Office Use Only



600425632416





## Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724

DATE <u>03/26/2024</u> ** <i>WAL</i>						
ENTITY NAMESTEL	LA AVE CAPITAL LL	C				
DOCUMENT NUMBE	ER	<del></del>				
	**PLEASE FILE T	THE ATTACHED AND RETURN**				
xxxxxxxx	Plain Copy					
	Certified Copy					
	Certificate of Status					
	**PLEASE OBTAIN THE	FOLLOWING FOR THE ABOVE ENTITY**				
	Certified Copy of Arts	· & Amendments				
	Certified Copy of Arts	& Amendments Complete File (Inclading Annaal Reports)				
	Certificate of Status					
	Certificate of Status K	Reflecting:				
	**APOSTILLE' /	NOTARIAL CERTIFICATION**				
COUNTRY OF DESTIN	IATION					
NUMBER OF CERTIFIC	CATES REQUESTED					
TOTAL OWED \$ 25		ACCOUNT # 120140000108 Littly United Corporate Services, Inc.  Any issues or concerns. Thank you so much!				
Please call Tina at	the above number for	any issues or concerns. Thank you so much!				

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

Pursuant to the provisio	ns of section 605.0115, Florida Statut	es, the undersigned,			
United Corporate Services, Inc.  Name of Registered Agent		. hereby resigns as			
Registered Agent for S	TELLA AVE CAPITAL LLC				
	Name of Limited Liability Com	pany			.•
L20000215398					
Document No	imber, if known				
A copy of this resignation	on was mailed to the above listed limi	ted liability company at its la	st known a	ıddress.	
The agency is terminate	d and the office discontinued on the 3 United Corporate Services, Inc.		ch this state	ement is	s filed.
	Michael A. Barr Signature of Resi	gning Agent	TA	2024 MAR 26	
If signing on behalf of a	n entity:		, , , , , , , , , , , , , , , , , , ,	<b>=</b>	~·~ [ ]
	Michael A. Barr		至	₩.	
	Typed or Printed Na	ne	SSE.	6	
	President		m <sub>s</sub>	7	
	Capacity		TÄLLAHASSEE, FLORIDA	AH 10: 23	ب
	FILING FEES: \$ 85.00 Active limited \$ 25.00 Administrative withdrawn limited	d liability company rely dissolved/ voluntarily di mited liability company	ssolved/		

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