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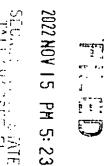
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COVER LETTER

Nam	e of Limited Liabili	ty Company
DOCUMENT NUMBER: L20000218560) 	
The enclosed Resignation of Registered for filing.	Agent for a Limit	ed Liability Company and fee are submitte
Please return all correspondence concern	ning this matter to	the following:
Chelsea Chapman		
Name of Person	<u>. </u>	_
Legaline Corporate Services, INC.		
Name of Firm/Compan	у	_
10601 Clarence Dr Ste 250		
Address		-
Frisco, TX 75033-3867		
City/State and Zip Cod	e	_
ra@legalinc.com		
E-mail address: (to be used for future annu	ual report notification)	_
For further information concerning this	matter, please call	
Chelsea Chapman	844 at (386-0178
Name of Person	Area Cod	e 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Registration Section Division of Corporations

TO:

Street Address:

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 provis	ions of section 605.0115, Florida Statutes, th	ie undersigned,			
Legalinc Corporate Services, INC.		, hereby resigns as	hereby resigns as		
	Name of Registered Agent	(
Registered Agent for	HAIDY SHOP LLC			_	
	Name of Limited Liability Company				
L20000218560					
Document	Number, if known				
A copy of this resigna	tion was mailed to the above listed limited li	ability company at its last k	nown addres	s.	
The agency is termina	ited and the office discontinued on the 31st of	lay after the date on which the	his statement	is fil	ed.
	Child Oed Ma	pwah Agent	<u>တ</u> [203	
If signing on behalf o	f an entity:		MLI Turi	7077 HOV	
	Chelsea Chapman				
	Typed or Printed Name		5. ·	5	1
	On Behalf of Legaline Corporate Services,	INC.	က်	7	T
	Capacity		E, FL	PH 5: 23	

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

• \$ 85.00 • \$ 25.00

FILING FEES:
\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company