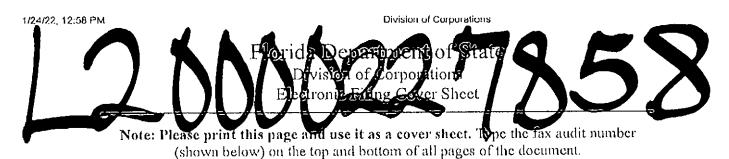
⊙ 02/07/2022 10:59 AM ET



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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:	Division of C	orporations		
		: (850)617-6383		
From:				
		: INCORPORATING SERVI	CES, LTD.	
		r : 120050000052		
	Priorie Env. Numban	: (850)656-7956 : (850)656-7953		
• •		, (===,===		
- an	nual report mail	ess for this business en lings. Enter only one e	mail address plea	for futur ase.**
- an	nual report mail	lings. Enter only one e	mail address plea	ase.**
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Electronic Filing Menu

Estimated Charge

Corporate Filing Menu

Help

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\$85.00

H2000030542 3

TO: Registration Section Division of Corporations

SUBJECT: BE STAR LLC			
Name of Limited Liability	Company	-	
DOCUMENT NUMBER: L20000227858		-	
The enclosed Resignation of Registered Agent for a Limited for filing.	Liability Company and fee at	re submitted	
Please return all correspondence concerning this matter to the	te following:		
Amanda Archambault			
Name of Person			
Incorporating Services, Ltd.			
Name of Firm/Company		7 20	
3500 S DuPont Highway		22 F	
Address	•	2022 FEB -7 AH 10: 20 SECASTARY OF STAIR	;
Dover, DE 19901		27.00 m	i [T
City/State and Zip Code	•	5 5 5	
klook@incserv.com		~ ₹ 20	
E-mail address: (to be used for future annual report notification)	•	<u> </u>	
For further information concerning this matter, please call:			
Kai Look 302	531-0703		
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 ① 02/07/2022 10:59 AM ET

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STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

→ 8506176383

Pursuant to the provisions of section 605.0115, Florida Sta	itutes, the undersigned,
Incorporating Services, Ltd.	, hereby resigns as
Name of Registered Agent	,
Registered Agent for BE STAR LLC	
Name of Limited Liability C	company
L20000227858	
Document Number, if known	
A copy of this resignation was mailed to the above listed l	imited liability company at its last known address.
The agency is terminated and the office discontinued on the	ne 31st day after the date on which this statement is filed.
AGhchcum	Resigning Agent
If signing on behalf of an entity:	202 8.2.3.5 8.2.3.5
Amanda Arch	ambault EB
Typed or Printed	Name & &
Assistant Sec	retary Ship II

FILING FEES:

Capacity

Active limited liability company Administratively dissolved/ voluntarily dissolved/ \$ 85.00 \$ 25.00 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