LZO 000243566

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(Add	ress)	
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COVER LETTER

TO: Registration Section Division of Corporations	• •
SUBJECT:	
Name of Limited Liability	Company
DOCUMENT NUMBER: L20000243566	
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 th	e following:
United States Corporation Agents, Inc.	
Name of Person	
Legalzoom.com, Inc.	
Name of Firm/Company	
101 North Brand Blvd. 11th Floor	
Address	
Glendale, CA 91203	
City/State and Zip Code	
raresignations@legalzoom.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Janna Pantoja 800	773-0888 x3950
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

TO:

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ons of section 605.01	15. Florida Statutes, the under	signed.			
United States Corp	poration Agents, I	nc.	horaby maline as			
Name of Registered Agent		ent .	_ , hereby resigns as			
Registered Agent for	Angels For Others	LLC				-
	Name of Lir	nited Liability Company				, .
L20000243566						
Document N	umber, if known					
A copy of this resignati	on was mailed to the	above listed limited liability c	ompany at its last	known aç	ddress.	
	(Signature of Resigning Agent	the date on which	this state	ment is	filed.
If signing on behalf of a	in entity:					
	Cheyenne Mose	eley			~.	
		yped or Printed Name United States Corporation Age	nts, Inc.		2020 SI	(Landary)
		Capacity		LAHAS	SEP 17	
	FILING \$ 85.00 \$ 25.00	FEES: Active limited liability con Administratively dissolved withdrawn limited liability	npany / voluntarily disso / company	OF STATE	10:11 HV	Ö

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