L20000247134

(Requestor's Name)				
(Address)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Business Linky Harrie)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
Luce				
J. HORNE				
AUG - 8 2024				

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2024 JUNE 1 FILES FO

COVER LETTER

	nited Liabilit	y Company
DOCUMENT NUMBER: L20000247134		
The enclosed Resignation of Registered Agent for filing.	for a Limite	d Liability Company and fee are submitted
Please return all correspondence concerning th	is matter to	the following:
United States Corporation Agents, Inc.		
Name of Person		_
Legalzoom.com, Inc.		
Name of Firm/Company		_
9900 Spectrum Dr.		
Address	<u></u>	_
Austin, TX 78717		
City/State and Zip Code		_
raresignations@legalzoom.com		
E-mail address: (to be used for future annual repor	t notification)	_
For further information concerning this matter,	, please call:	
a	800 .t (773-0888
Name of Person	Area Code	Daytime Telephone Number

MAILING ADDRESS:

liability company.

TO: Registration Section Division of Corporations

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

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ons of section 605.0115, Florida Statutes, the undersi	igned.
United States Corp	poration Agents, Inc.	nereby resigns as
	Name of Registered Agent	
Registered Agent for	he Baking Mermaid LLC	
		• • • • • • • • • • • • • • • • • • • •
	Name of Limited Liability Company	ن ا
L20000247134		
Document N	lumber, if known	
A copy of this resignati	ion was mailed to the above listed limited liability co	ompany at its last known address.
The agency is terminate	ed and the office discontinued on the 31st day after t	he date on which this statement is filed.
	Crik Treutlein	
	Signature of Resigning Agent	
If signing on behalf of	an entity:	
	Erik Treutlein	
	Typed or Printed Name	
	Vice President on behalf of United States Corporation Age	ents, Inc.
	Capacity	

FILING FEES:

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withdrawn limited liability company \$ 85.00 \$ 25.00

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