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(R	equestor's Name)	
(A	ddress)	
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(Ĉ	ity/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
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(C	locument Number)	
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## **COVER LETTER**

BLAIZING CREATIVES LLC SUBJECT: Name of Limited Liability Company DOCUMENT NUMBER: 1.20000257741 The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Ryan Potter Name of Person ZenBusiness Inc. Name of Firm/Company 336 E. College Ave. Suite 301 Address Tallahassee, FL 32301 City/State and Zip Code ra@zenbusiness.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Ryan Potter Name of Person

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

TO:

Registration Section Division of Corporations

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

Pursuant to the provision	ns of section 605.01	15, Florida Statutes, the und	ersigned.			
REGISTERED AGENTS INC hereby i		_, hereby resigns as				
	Name of Registered Ag					
Registered Agent for BI	AIZING CREATIVE	ES LLC				-
	Name of Lir	mited Liability Company				<b>_</b> *
L20000257741						
Document Nu	mber, if known					
A copy of this resignation	on was mailed to the	above listed limited liability	y company at its last	known a	ddress.	
The agency is terminated	d and the office disc	ontinued on the 31st day afti	er the date on which	this state	ment is	s filed.
	Day	Signature of Resigning Agent				
If signing on behalf of a	n entity:					
	REGISTERED AGE	ENTS INC. by David Roberts				
		Typed or Printed Name		77	~	
	Assistant Secretary				123	
		Capacity		An	¥	-
	FILING \$ 85.00 \$ 25.00	GFEES: Active limited liability of Administratively dissolv withdrawn limited liabi	company /ed/ voluntarily diss/ lity company	MARY OF STATE	2023 MAY 26 PM 12: 03	

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