L20 000282887

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name)	
(D	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	
		1
		1
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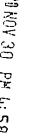
Office Use Only



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AN 12 2021 S. YOUNG



COVER LETTER

TO: Registration Section Division of Corporations	* -
Division of Corporations	•
SUBJECT: D'ANNS CLEANING SERVICE LLC	
Name of Limited Liability	Company
DOCUMENT NUMBER: L20000282887	
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 the	ne 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:	
800	773-0888
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ons of section 605.0115, Florida Statutes, the unders	agned.
United States Corporation Agents, Inc.		hereby resigns as
	Name of Registered Agent	nerco, resigns as
Registered Agent for _	D'ANNS CLEANING SERVICE LLC	
	Name of Limited Liability Company	,
L20000282887		
Document N	Pumber, if known	
A copy of this resignat	ion was mailed to the above listed limited liability c	ompany at its last known address.
The agency is terminat	ed and the office discontinued on the 31st day after Signature of Resigning Agent	7.050 KON
If signing on behalf of	an entity:	ω 0
	Cheyenne Moseley	
	Typed or Printed Name Asst. Secretary for United States Corporation Age	
	Capacity	o

FILING FEES:

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