L21000040294

(Requestor's Name)		
(Address)		
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SECRETARY OF STATE

COVER LETTER

SUBJECT: Salustina LLC		
Name of Limited Liability	Company	
DOCUMENT NUMBER: L21000040294		
The enclosed Resignation of Registered Agent for a Limited for filing.	d Liability Company and fee are	e submitted
Please return all correspondence concerning this matter to the	ne following:	
United States Corporation Agents, Inc.		
Name of Person	-	
Legalzoom.com, Inc.	S	207
Name of Firm/Company	CCRE	14 TH
9900 Spectrum Dr.		2024 HAR 27
Address	- 735 745	70
Austin, TX 78717		
City/State and Zip Code	- <u>111</u>	17
raresignations@legalzoom.com		
E-mail address: (to be used for future annual report notification)	-	
For further information concerning this matter, please call:		
at (773-0888	
	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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

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

rursuant to the provisi	ions of section 605.0115, Florida Statutes, the undersi	igned,
United States Cor	poration Agents, Inc.	hereby resigns as
	Name of Registered Agent	refer resigns as
Registered Agent for	Salustina LLC	
	Name of Limited Liability Company	 -
L21000040294		
Document 1	Number, if known	
A copy of this resignal	tion was mailed to the above listed limited liability co	ompany at its last known address.
The agency is terminate	ted and the office discontinued on the 31st day after the	he date on which this statement is filed.
	Signature of Resigning Agent	2024 HAR 27 2024 HAR 27 SECRETAR STALLAN
If signing on behalf of	an entity:	77 July 12 12 12 12 12 12 12 12 12 12 12 12 12
	Cheyenne Moseley	PM 1: 18
	Typed or Printed Name	四星 一
	Asst. Secretary for United States Corporation Agen	its, Inc.
	Capacity	

Make checks payable to Florida Department of State and mail to:

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314