# L21000093932

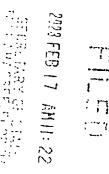
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#### **COVER LETTER**

TO: Registration Section Division of Corporations

## SUBJECT: Nikki's Casual Dresses And Activewear LLC Name of Limited Liability Company DOCUMENT NUMBER: L21000093932 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: United States Corporation Agents, Inc. Name of Person Legalzoom.com, Inc. Name of Firm/Company 9900 Spectrum Dr. Address Austin, TX 78717 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: 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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

Pursuant to the provis	ions of section 605.0115, Florida Statutes, the unde	rsigned,	
United States Corporation Agents, Inc.		, hereby resigns as	
	Name of Registered Agent	· -	
Registered Agent for	Nikki's Casual Dresses And Activewear L	LC	
	Name of Limited Liability Company	,	
L21000093932			
Document	Number, if known		
A copy of this resigna	tion was mailed to the above listed limited liability	company at its last known address.	
The agency is termina	ted and the office discontinued on the 31st day afte	r the date on which this statement is filed.	
	Signature of Resigning Agent	293 F	
If signing on behalf of	an entity:		
	Cheyenne Moseley		
	Typed or Printed Name		
	Asst. Secretary for United States Corporation Ag	ents, Inc.	
	Capacity		

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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