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2804 Gateway Oaks Drive #100 Sacramento, CA 95833

Phone 888-272-3725 Fax 800-603-5868

REFERENCE # MUST BE ON INVOICE TO BE PAID

Date:

April 28, 2022

!AE:

Cori Ann Crosthwaite

Vendor#

1960

IEmail:

ccrosthwaite@myparacorp.com

TO:

Florida Department of State

Division of Corporations PO Box 6327

Tallahassee, FL 32314

1771659

Return Shipping:

Ref Number:

FAX:

850-687-6381

EMAIL:

NAME:

SELF CARE CLEANING SERVICES LLC

FILE REGISTERED AGENT RESIGNATION

State

FL

PLEASE EMAIL OR FAX A COPY OF RESULTS

If the document is black and white, please return it to via e-mail and regular mail. If the document has color or any raised seals, please send it via:

CALL IMMEDIATELY IF YOU HAVE ANY QUESTIONS OR THE DEADLINE WILL NOT BE MET 888-272-3725

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	s of section 605.0115, Floric	la Statutes, the undersigned,		
ROCKET LAWYER CORPORATE SERVICES LLC Name of Registered Agent		hereby re	, hereby resigns as	
		, nercby te.		
Registered Agent for S	ELF CARE CLEANING	SERVICES LLC		
	Name of Limited Liab	ility Company	,,	
L21000142978				
Document Nun	nber, if known			
A copy of this resignation	was mailed to the above lis	sted limited liability company at	t its last known address.	
The agency is terminated	and the office discontinued	on the 31st day after the date or	n which this statement is filed	
	Signatu	re of Resigning Agent		
If signing on behalf of an	entity:		7,	
	EDNA PERRY		:	
•	Typed or P	rinted Name	•	
	Asst. Secretary Rocket Lawye	r Corporate Services LLC		
	Capac	ity		
			•	
	FILING FEES: \$ 85.00 Activ. \$ 25.00 Admi with	e limited liability company nistratively dissolved/ voluntar Irawn limited liability company	rily dissolved/	

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