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Florida Department of State

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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LLC REGISTERED AGENT RESIGNATION DAAS ALCHEMY LLC

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MAY 15 2024

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STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

			意复 九		
Pursuant to the provision	ons of section 605.0115, Florida Statutes, the	undersigned,	超五 一		
REGISTERED AG	GENTS, INC.	, hereby resigns as	£ 5 6 K		
	Name of Registered Agent				
Registered Agent for DAAS ALCHEMY LLC			(C. 2)		
	Name of Limited Liability Company		033		
	Name of Limited Liability Company		~~		
L21000306209)				
Document N	lumber, if known				
A copy of this resignati	ion was mailed to the above listed limited lia	bility company at its last k	nown address.		
The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.					
	David Boerts Signature of Resigning /				
If signing on behalf of	an entity:				
	David Roberts Typed or Printed Name				
	Assistant Secretary 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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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