7/27/23, 11:09 AM

Division of Corporations

Florida

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000261673 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCORPORATING SERVICES, LTD.

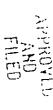
Account Number : I20050000052 : (850)556-7956 Phone Fax Number (850)656-7953

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:___

LLC REGISTERED AGENT RESIGNATION WANDER LUST ATTITUDE, LLC

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AUG 23 2023

K. Brumbley

H23000261673 3

TO: Registration Section Division of Corporations

SUBJECT: WANDER LUST ATTITUDE, LLC	
Name of Limited Liabilit	y Company
DOCUMENT NUMBER: L21000364973	
The enclosed Resignation of Registered Agent for a Limite for filing.	d Liability Company and fee are submitted
Please return all correspondence concerning this matter to t	he following:
Westley Look	
Name of Person	
Incorporating Services, Ltd.	
Name of Firm/Company	-
3500 S DuPont Highway	
Address	-
Dover, DE 19901	
City/State and Zip Code	-
wlook@incserv.com	
E-mail address: (to be used for future annual report notification)	-
For further information concerning this matter, please call:	
Westley Look 302	531-0703
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

○ 08/23/2023	9:06	ΑМ	ET,	
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Incorporating Servic

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pg 3 of 3

H23000261673 3

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of	of section 605.0115, Florida Statutes, the undersigne	d,
Incorporating Services	s, Ltd.	
Na	me of Registered Agent , herel	by tesigns as
Registered Agent for WAN	NDER LUST ATTITUDE, LLC	
	Name of Limited Liability Company	,
L21000364973		
Document Number	er, if known	
A copy of this resignation v	vas mailed to the above listed limited liability compa	nny at its last known address.
The agency is terminated an	and the office discontinued on the 31st day after the d	_4
If signing on behalf of an ea	ntity;	~2
	Amanda Archambault	023
_	Typed or Printed Name Assistant Secretary	APPROPRIES AND PALE
	Capacity	
	FILING FEES: \$ 85.00 Active limited liability compants and selection of the selection of t	untarily dissolved/

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