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## LLC REGISTERED AGENT RESIGNATION SLEEPWELL ESTATE LLC

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 0       |
| Page Count            | 01      |
| Estimated Charge      | \$85.00 |

M. SOLOMON APR 1 5 2024

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

| Pursuant to the provisi              | ons of section 605.0115, Florida Statu | ites, the undersigned,                       |                           |
|--------------------------------------|--|--|---------------------------|
| ROCKET LAWYER CORPORATE SERVICES LLC |  | , hereby resigns as                          |                           |
|                                      | Name of Registered Agent               | ,  |                           |
| Registered Agent for _               | Sleepwell Estate LLC                   |  |                           |
|                                      | Name of Limited Liability Con          | пралу  | ,                         |
| L22000106122                         |  |  |                           |
| Document l                           | Number, if known                       |  |                           |
| A copy of this resignat              | ion was mailed to the above listed lim | ited liability company at its last known add | lress.                    |
| The agency is terminal               | ed and the office discontinued on the  | 31st day after the date on which this statem |                           |
|                                      | Edina Was                              | istania Agant                                | 2024 APR                  |
| If signing on behalf of              | ·                                      | igning Agent                                 | 55                        |
|                                      | EDNA PERRY                             |  | -: <del>-:</del> -        |
|                                      | Typed or Printed Na                    | ame  | - 12 <del>- 1</del> 3 - 3 |
|                                      | Asst. Secretary Rocket Lawyer Corpo    | rate Services LLC                            | 32                        |
|                                      | Capacity                               |  |                           |

Make checks payable to Florida Department of State and mail to:
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P.O. Box 6327

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

Tallahassee, FL 32314