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(Requestor's Name)		
(Address)		
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PICK-UP WAIT MAIL		
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(Document Number)		
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2024 APR 22 PH 4: OH SECRETARY SEE FATE

COVER LETTER

Division of Corporations		
SUBJECT: Name of Limited Liability 122000181126	Company	
DOCUMENT NUMBER: 1.22000184136		
The enclosed Resignation of Registered Agent for a Limited for filling.	d Liability Company and fee are	: submitted
Please return all correspondence concerning this matter to the	ne following:	
Cory Betts		
Name of Person		
ZenBusiness Inc.		
Name of Firm/Company		
336 E. College Ave. Suite 301	G	20
Address	ZE	24
Tallahassee, FL 32301	一门	2024 APR 22
City/State and Zip Code	第5	10 -
ra@zenbusiness.com	(3) (2) (3) (3) (3) (4)	PH 1: 04
E-mail address: (to be used for future annual report notification)		1:0
For further information concerning this matter, please call:	iT	
Cory Betts 844	493-6249	
Name of Person at (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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

TO: Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 **Street Address:**

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provis	ions of section 605.0115, Florida Statutes, the u	indersigned,
ZenBusiness Inc.		hereby resigns as
<u></u>	Name of Registered Agent	
Registered Agent for	Bomb Shell Trends LLC	
	Name of Limited Liability Company	·
L22000184136		
Document	Number, if known	2
_	tion was mailed to the above listed limited liabi	一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一
The agency is termina	signature of Resigning Ag	2 PH 1
If signing on behalf of	fan entity:	PL 04
	ZenBusiness Inc. by Khadijeh Hemmati	
	Typed or Printed Name	
	Secretary	
	Canacity	· · · · · · · · · · · · · · · · · · ·

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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