# 122000210145

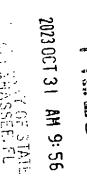
(Requestor's Name)			
(Address)			
,			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

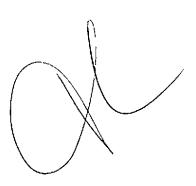
Office Use Only



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### COVER LETTER

Registration Section Division of Corporations SUBJECT: Good Spirits Essentials LLC Name of Limited Liability Company DOCUMENT NUMBER: L22000210145 The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing. Please return all correspondence concerning this matter to the following: United States Corporation Agents, Inc. Name of Person Legalzoom.com, Inc. Name of Firm/Company 9900 Spectrum Dr. Address Austin, TX 78717 City/State and Zip Code raresignations@legalzoom.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

Name of Person

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

TO:

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

A ...

Pursuant to the provis	sions of section 605.0115, Florida Statutes, the unde	ersigned.		
United States Corporation Agents, Inc.		, hereby resigns as		
	Name of Registered Agent	, thereby resigns do		
Registered Agent for	Good Spirits Essentials LLC			
	Name of Limited Liability Company		,	
L22000210145				
Document	Number, if known			
A copy of this resigna	ation was mailed to the above listed limited liability	company at its last known addr	ess.	
The agency is termina	ated and the office discontinued on the 31st day after	er the date on which this stateme	nt is filed	i,
	Signature of Resigning Agent	TALLAH TALLAH	2023 001 31	under States
If signing on behalf of an entity:		HAS	=	, em
	Cheyenne Moseley	(A)	-8-	
	Typed or Printed Name		و (	U
	Asst. Secretary for United States Corporation A	gents, Inc.	56	

FILING FEES:

Capacity

\$ 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