L22000350382

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(Address)
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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: SunSet Prosperities, LLC	
Name of Limited Liabilit	y Company
DOCUMENT NUMBER: L22000350382	
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:
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:	
800	773-0888
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 60	5.0115, Florida Statutes, the ur	ndersigned.		
United States Corporation Agen	ts, Inc.	, hereby resigns as		
Name of Registered Agent Registered Agent for SunSet Prosperities, LLC		, hereby resigns as		
Name	of Limited Liability Company	,		
L22000350382				
Document Number, if known				
A copy of this resignation was mailed to	the above listed limited liabili	ity company at its last known address.		
The agency is terminated and the office If signing on behalf of an entity:	discontinued on the 31st day a	after the date on which this statement is filed	d.	
•				
Cheyenne N				
Asst. Secretan	Typed or Printed Name y for United States Corporation	Agents Inc		
	Capacity	2023 H		
FIL \$ 85 \$ 25	ING FEES: 5.00 Active limited liability 5.00 Administratively disso withdrawn limited liab	olved/ voluntarily dissolved/ 💝 🧪 🦠	The Figure	

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

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