L22000359139

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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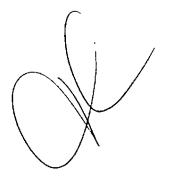


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COVER LETTER

SUBJECT: Roselaure Holt - Life coach Limited Liability Company Name of Limited Liability Company DOCUMENT NUMBER: L22000359139 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:) Daytime Telephone Number Name of Person

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

TO:

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 provisi	ions of section 605.0115, Florida Statutes, the undersign	ied.
United States Cor	rporation Agents, Inc.	reby resigns as
_	Name of Registered Agent	co, realgita us
Registered Agent for	Roselaure Holt - Life coach Limited Liability C	ompany
	Name of Limited Liability Company	,
L22000359139		
Document	Number, if known	
A copy of this resigna	tion was mailed to the above listed limited liability com	pany at its last known address.
The agency is termina	ted and the office discontinued on the 31st day after the	date on which this statement is filed.
	Signature of Resigning Agent	2022 NOV 14
If signing on behalf of an entity:		
	Cheyenne Moseley	(a) 1501
	Typed or Printed Name	
	Asst. Secretary for United States Corporation Agents,	, Inc. P. 5
	Capacity	

FILING FEES:

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Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company \$ 85.00 \$ 25.00

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