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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: BAREFOOT BABES BOU	
Name of Limited Liability	Company
DOCUMENT NUMBER: L22000439036	
The enclosed Resignation of Registered Agent for a Limited for filing.	Liability Company and fee are submitted
Please return all correspondence concerning this matter to the	ne 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:	
at (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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 provis	ions of section 605.0115, Florida Statutes, the under	sign e d.	
United States Corporation Agents, Inc. , h		, hereby resigns as	
	Name of Limited Liability Company	<u></u> ,	
L22000439036			
Document	Number, if known		
A copy of this resignation. The agency is terminating	Number, if known ation was mailed to the above listed limited liability cated and the office discontinued on the 31st day after Signature of Resigning Agent	the date on which this statement is filed.	
	Signature of Resigning Agent	AR 14 P	
If signing on behalf o	f an entity:		
Cheyenne Moseley		PH 12: 08	
	Typed or Printed Name		
	Asst. Secretary for United States Corporation Age	ents, Inc.	
	Capacity		

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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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