L23000035616

| (Requestor's Name) | | |
|---|--------------------------|--|
| (Address) | | |
| (Address) | | |
| (City/State/Zip/Phone #) | | |
| PICK-UP WAIT | MAIL | |
| (Business Entity Nan | ne) | |
| | · | |
| (Document Number) | | |
| Certified Copies Certificates | of Status | |
| Special Instructions to Filing Officer: | | |
| | J. HORNE JUL - 1 2024 | |





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05/30/24--01014--022 *+25.00



COVER LETTER

SUBJECT: Plant Based Plant Company LLC Name of Limited Liability Company DOCUMENT NUMBER: L23000038616 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: 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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 P.O. Box 6327 Tallahassee, FL 32314

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO:

Registration Section Division of Corporations

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

| Pursuant to the provisions of section 605.0115, Florida Statutes, the ur | ndersigned, | |
|--|--------------|----------|
| United States Corporation Agents, Inc. | _ | All Hall |
| Name of Registered Agent | | |
| Registered Agent for Plant Based Plant Company LLC | | |
| | | ्र |
| Name of Limited Liability Company | | · Jr |
| L23000038616 | | |
| Document Number, if known | | |
| A copy of this resignation was mailed to the above listed limited liabili. The agency is terminated and the office discontinued on the 31st day a | | |
| Signature of Resigning Agen | nt | |
| If signing on behalf of an entity: | | |
| Cheyenne Moseley | | |
| Typed or Printed Name | <u>_</u> | |
| Asst. Secretary for United States Corporation A | Agents, Inc. | |
| 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