L23000047588

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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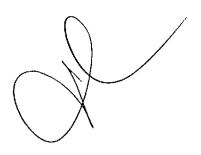




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COVER LETTER

SUBJECT: Mindset Life Coaching LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L23000047588

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

Austin, TX 78717

City/State and Zip Code
raresignations@legalzoom.com

Address

ormation concerning this matter, please call

For further information concerning this matter, please call:

E-mail address: (to be used for future annual report notification)

Name of Person at (800) 773-0888

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

9900 Spectrum Dr.

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 provis	ions of section 605.0115, Florida Statutes, the under	signed,	
United States Corporation Agents, Inc.		, hereby resigns as	
	Name of Registered Agent	nereby resigns as	
Registered Agent for	Mindset Life Coaching LLC		
	Name of Limited Liability Company		
L23000047588			
Document	Number, if known		
	tion was mailed to the above listed limited liability of		
The agency is termina	Signature of Resigning Agent	_	7023 OCT 3
If signing on behalf of an entity:			در ا در در د
	Cheyenne Moseley	<i>်</i> က္"	d F7-Extense
	Typed or Printed Name		-
	Asst. Secretary for United States Corporation Age	nts, Inc.	ម ស
	Capacity	U	D

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