

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L2300168977

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.
Account Number : I20090000081
Phone : (307)200-2803
Fax Number : (813)436-5206

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

RECEIVED
2024 JUN 26 PM 4:09
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
2024 JUN 26 AM 12:12

**LLC REGISTERED AGENT RESIGNATION
YOU NEED IT LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$85.00

T. LEMIEUX

JUN 27 2024

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STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

REGISTERED AGENTS, INC. , hereby resigns as

Name of Registered Agent

Registered Agent for YOU NEED IT LLC

Name of Limited Liability Company

L23000168977

Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

David Roberts
Signature of Resigning Agent

Signature of Resigning Agent

If signing on behalf of an entity:

David Roberts

Typed or Printed Name

Assistant Secretary

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\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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

INHS17 (2/14)

known address.

his statement is filed.

FILED

JUN 26 AM 12:12