L23000237183

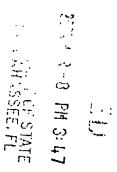
(Requestor's Name)
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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: The Cherished General S	tore LLC			
Name of Limited Liability	Company			
DOCUMENT NUMBER: L23000237183				
The enclosed Resignation of Registered Agent for a Limited for filing.	d Liability Company រ	and fee are	e subn	nitted
Please return all correspondence concerning this matter to t	he following:			
United States Corporation Agents, Inc.				
Name of Person	-			
Legalzoom.com, Inc.				
Name of Firm/Company	-		Anga Tarih	
9900 Spectrum Dr.			T:	
Address	_			
Austin, TX 78717		,n	င်း	
City/State and Zip Code	-	ůψ. Ų,	PH 3: 47	ر عدري سرمها سرمها
raresignations@legalzoom.com		FATE	: 47	
E-mail address: (to be used for future annual report notification)	-			
For further information concerning this matter, please call:				
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 provision	ns of section 605.011:	5, Florida Statutes, the unde	rsigned,		
United States Corporation Agents, Inc. Name of Registered Agent		_ , hereby resigns as			
		nt			
Registered Agent for Th	ne Cherished Ger	neral Store LLC			
	Name of Lim	ited Liability Company			<u></u> ,
L23000237183					
Document Nu	mber, if known				
A copy of this resignation	on was mailed to the a	bove listed limited liability	company at its last know	n addres	Ss.
The agency is terminated	d and the office disco	ntinued on the 31st day afte	r the date on which this s	tatement	t is filed.
		Signature of Resigning Agent			
If signing on behalf of a	n entity:			ر د جو	
	Cheyenne Mose	ley		100 E	
	T	yped or Printed Name		S	
	Asst. Secretary for U	Inited States Corporation Ag	jents, Inc.	့ ငာ	•
		Capacity	 ന സ്ത	PH 3:47	75.
			FL	3: 47	*********
	FILING \$ 85.00 \$ 25.00	FEES: Active limited liability of Administratively dissolve withdrawn limited liabil	ompany ed/ voluntarily dissolved ity company	1	

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