# L23000273 646

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
<u> </u>		

Office Use Only



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### **COVER LETTER**

SUBJECT: BIO ENERGY THERAPY	LLC
Name of Limited Liability DOCUMENT NUMBER: L23000273646	y Company
DOCUMENT NUMBER: 220000270040	
The enclosed Resignation of Registered Agent for a Limite for filing.	d Liability Company and fee are submitted
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	7021 SE
9900 Spectrum Dr.	
Address	28 7 T
Austin, TX 78717	SECRE PARK SEE STAT
City/State and Zip Code	(11)
raresignations@legalzoom.com	-17 8
E-mail address: (to be used for future annual report notification)	-
For further information concerning this matter, please call:	
at (	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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

TO: Registration Section Division of Corporations

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 provisi	ons of section 605.0115, Florida Statutes, the under	signed,
United States Corporation Agents, Inc.  Name of Registered Agent		hereby resigns as
		nerooy resigns as
Registered Agent for _	BIO ENERGY THERAPY LLC	
	Name of Limited Liability Company	,
L23000273646		
Document ?	Sumber, if known	
A copy of this resignat	ion was mailed to the above listed limited liability of	company at its last known address.
The agency is terminat	ed and the office discontinued on the 31st day after	the date on which this statement is filed.
	Crik Treutlein	SECRETARISCUES!
	Signature of Resigning Agent	三 2 1
lf signing on behalf of	an entity:	
	Erik Treutlein	现金 王
	Typed or Printed Name	28
	Vice President for United States Corporation Age	nts, 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