

L23 D00 398 422

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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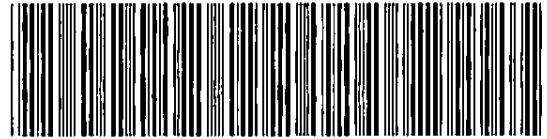
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Melbourne Nutrition, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: 423000398422

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:

Brooke Steele
Name of Person

Melbourne Nutrition, LLC
Name of Firm/Company

401 N Wickham Rd Ste D
Address

Melbourne, FL 32935
City/State and Zip Code

melbournenutrition23@gmail.com
E-mail address: (to be used for future annual report notification)

2001 FEB -6 AM 9:59

For further information concerning this matter, please call:

Brooke Steele at (813) 263-6181
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

Ginger Thompson

Name of Registered Agent

, hereby resigns as

Registered Agent for

Melbourne Nutrition, LLC

Name of Limited Liability Company

L23000398422

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.

Ginger Thompson

Signature of Resigning Agent

If signing on behalf of an entity:

Typed or Printed Name

Capacity

FILING FEES:

\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company

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