L2400028523

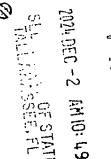
(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Nam	e)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
II.		
		

Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Meals By Design LLC			
Name of Limited Liability	y Company		
DOCUMENT NUMBER: L24000235232			
The enclosed Resignation of Registered Agent for a Limited for filing.	d Liability Company and fee are	submitted	
Please return all correspondence concerning this matter to the	he following:		
United States Corporation Agents, Inc.			
Name of Person	-		
Legalzoom.com, Inc.			
Name of Firm/Company	-		
9900 Spectrum Dr.			
Address	-		
Austin, TX 78717			
City/State and Zip Code	- <i>d</i> a	.~ .	
raresignations@legalzoom.com	7: 27: 27: 27: 27: 27: 27: 27: 27: 27: 2	1,420	स्म पूर्णा <u>व</u>
E-mail address: (to be used for future annual report notification)	-	JEC JEC	કું કુકતવ્યક
For further information concerning this matter, please call:		-2	1
at (773-0888 SS	AHIO: 5	
Name of Person Area Code	Daytime Telephone Number ¬	: 51 TATI	

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

rursuani to the provi	sions of section 605.01	15, Florida Statutes, the under	signed,			
United States Co	orporation Agents, I	Inc.	hereby resign	ne ac		
Name of Registered Agent				113 (13		
Registered Agent for	Meals By Design	LLC				
	Name of Li	mited Liability Company				•
L24000235232						
Document	Number, if known					
A copy of this resigna	ation was mailed to the	above listed limited liability of	ompany at its	s last known a	address.	
	Erik	ontinued on the 31st day after Trutlsin Signature of Resigning Agent	———	men tiis stat	ement is	med.
If signing on behalf o	•					
	Erik Treutlein			_		
		Typed or Printed Name		AD 👱	203	
	Vice President on beh	alf of United States Corporation Ag	ents, Inc.		2024 DEC	
	FILING \$ 85.00 \$ 25.00	Capacity FEES: Active limited liability cor Administratively dissolved withdrawn limited liability	npany I/ voluntarily v company	SSEE, OF STALL GISSOLVEIL	-2 AH 10: 51	1

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