M19000000 788

	(Requestor's Name)	
	(Address)	
	(Muuress)	
	(Address)	
	(City/State/Zip/Phone #)	
_	_	_
PICK-UF	P WAIT	MAIL
_	_	
	(Business Entity Name)	
	(Document Number)	
Certified Copies	Certificates of	f Status
Certified Copies		
0 1011000000000000000000000000000000000	Filia - Office	
Special Instructions to	Filing Officer;	
		1
		4
L		

Office Use Only



000418013410

2mm COT 31 - PM 12: 53



CORPORATION SERVICE COMPANY 1201 Hays Street
Tallhassee, FL 32301
Phone: 850-558-1500

	ACCOUNT NO.		12000000	0195			
	REFERENCE	Ξ :	090608	8323810	ı		
	AUTHORIZATION	1 :	Frault 1	Lenan			
	COST LIMIT	· :	\$ 85.00	unas			
ORDER DATE :	October 25, 202	23				 _	
ORDER TIME :	1:47 PM						
ORDER NO. :	090608-005					~	
CUSTOMER NO:					_	1. J.	
	CHANGE OF					- III III III III III III III III III I	
NAME :	WORLD'S MOST	C HAI	NDSOME BOY	/ LLC	• 1 }	ω	
PLEASE RETURN	THE FOLLOWING A	S PI	ROOF OF FI	LING:			
	FIED COPY STAMPED COPY						
CONTACT PERSON	N: Eyliena Bake	er -	- EXT#				
			EXAMINER	l:			

COVER LETTER

TO: Registration Section Division of Corporations

World's Most Handsome Boy LLC SUBJECT:		
Name of Limited Liability	y Company	
DOCUMENT NUMBER: M19000000788		
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:	
RESIGNATIONS DEPARTMENT		
Name of Person	-	
CORPORATION SERVICE COMPANY		
Name of Firm/Company	_	
251 LITTLE FALLS DRIVE		
Address	_	
WILMINGTON. DE 19808		2200
City/State and Zip Code	-	\Box
ANNUALREPORTS@CSCGLOBAL.COM		<u>မ</u>
E-mail address: (to be used for future annual report notification)	-	II
For further information concerning this matter, please call:	· : ;	çα <u>13</u>
RESIGNATION DEPT 800 at (927-9801	ယ်
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 provisi	ons of section 605.0115, Florida Stat	utes, the undersigned,			
CORPORATION SERVICE COMPANY		, hereby resigns as	hereby recions as		
	Name of Registered Agent				
Registered Agent for _	World's Most Handsome Boy LLC				-
	Name of Limited Liability Co	mpany			.,
M19000000788					
Document N	lumber, if known				
	ion was mailed to the above listed lined and the office discontinued on the	31st day after the date on which			
	Eylina Ba Assistant Vice Pres Signature of Re	esigning Agent		20	
If signing on behalf of an entity:					
	BY EYLIENA BAKER		-:.	<u> </u>	
	Typed or Printed N	lame	÷	<u>ံ</u>	
	VICE PRESIDENT				•
	Capacity			장	- ;
			11.	53 3	
	FILING FEES: \$ 85.00 Active limit \$ 25.00 Administrat withdrawn	ed liability company ively dissolved/ voluntarily disso limited liability company	lved/		

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