

m19000003087

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

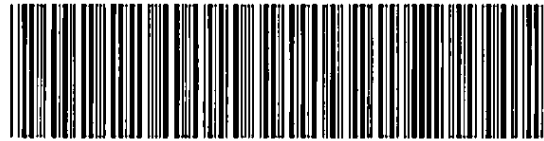
(Business Entity Name)

(Document Number)

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2022 MAY 18 AM 11:05

# RA Resignation

MAY 26 2022

D CUSHING

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

ACCOUNT NO. : I20000000195

REFERENCE : 692162 8323810

AUTHORIZATION :

COST LIMIT : \$785.00

ORDER DATE : May 18, 2022

ORDER TIME : 1:38 PM

ORDER NO. : 692162-010

CUSTOMER NO: 8323810

CHANGE OF AGENT

NAME: GOALZ DAIRY FEDERAL HWY FL, LL  
C

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX PLAIN STAMPED COPY

CONTACT PERSON: Unassigned

EXAMINER'S INITIALS: \_\_\_\_\_

2022 MAY 18 AM 11:05  
FILED

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** GOALZ DAIRY FEDERAL HWY FL, LLC  
Name of Limited Liability Company

**DOCUMENT NUMBER:** M19000003087

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:

RESIGNATIONS DEPARTMENT

Name of Person

CORPORATION SERVICE COMPANY

Name of Firm/Company

251 LITTLE FALLS DRIVE

Address

WILMINGTON, DE 19808

City/State and Zip Code

ANNUALREPORTS@CSCGLOBAL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RESIGNATION DEPT                      800                      927-9801  
Name of Person                      at (                      )                      Daytime Telephone Number  
Area Code

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

CORPORATION SERVICE COMPANY

, hereby resigns as

Name of Registered Agent

Registered Agent for GOALZ DAIRY FEDERAL HWY FL, LLC

Name of Limited Liability Company

M19000003087

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.

*Alexxis Weiland*, assistant vice president

Signature of Resigning Agent

If signing on behalf of an entity:

BY ALEXNIS WEILAND

Typed or Printed Name

VICE PRESIDENT

Capacity

2022 MAY 18 AM 11:05

### 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