E8120000

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

Office Use Only



500369574265

Ra Risigno

MAY 2 6 2022

D CUSHING

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 692162 8323810

AUTHORIZATION

COST LIMIT

ORDER DATE: May 18, 2022

ORDER TIME : 8:38 AM

ORDER NO. : 692162-020

CUSTOMER NO: 8323810

CHANGE OF AGENT

NAME: GOALZ DAIRY TRADITIONS FL, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XX __ PLAIN STAMPED COPY

CONTACT PERSON: Unassigned

COVER LETTER

COAL Z DAIDY TRADITIONS EL. LLC	
SUBJECT: GOALZ DAIRY TRADITIONS FL, LLC Name of Limited Liability	Company
-	Company
DOCUMENT NUMBER: M19000006183	
The enclosed Resignation of Registered Agent for a Limited for filing.	I Liability Company and fee are submitted
Please return all correspondence concerning this matter to the	ne 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 DEPTat (927-9801
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Registration Section Division of Corporations

TO:

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 provisio	ns of section 605.0115	5. Florida Statutes, the ur	ndersigned,			
CORPORATION SERVI	CE COMPANY		, hereby resigns as			
	Name of Registered Agen					
Registered Agent for G	OALZ DAIRY TRADIT	FIONS FL. LLC				
	Name of Limi	ited Liability Company			,	
M1190000006183						
Document N	umber, if known					
		bove listed limited liabi				~
The agency is terminate	ed and the office discor	ntinued on the 31st day	after the date on which	this statem	ent is f	iled.
	alexas l	Weiterch, assistant va pre	(dod			
	-	Signature of Resigning Age	ent			
If signing on behalf of	an entity:				20.	
	BY ALEXXIS WEIL	AND			2022 MAY	. 44 . 44
		yped or Printed Name				; ;
	VICE PRESIDENT				8	•
		Capacity			<u> </u>	
	<u>FILING</u>	FEES:		:	: 05	
	\$ 85.00 \$ 25.00	Active limited liabili Administratively diss withdrawn limited li	ty company solved/ voluntarily diss ability company	olved/		