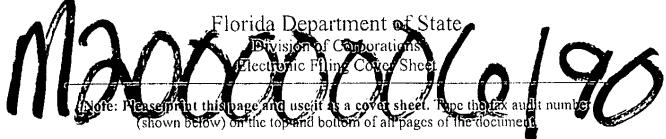
2/20/23, 12:13 PM

Division of Corporations



(((H23000065560 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INCORPORATING SERVICES, LTD.

Account Number : I20050000052 Phone : (850)656-7956 Fax Number : (850)656-7953

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

원기년 [전문 Email Address:_

LLC REGISTERED AGENT RESIGNATION HARVES GLOBAL ENTERTAINMENT, LLC

Certificate of Status	0
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Help

T. LEMIEUX

MAR 2 8 2023

H230000655603

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: HARVES GLOBAL ENTERTAINMENT, LLC	;
Name of Limited Liability	Company
DOCUMENT NUMBER: M2000000619	
The enclosed Resignation of Registered Agent for a Limited for filing.	Liability Company and fee are submitted
Please return all correspondence concerning this matter to the	e following:
Westley Look	
Name of Person	
Incorporating Services, Ltd.	
Name of Firm/Company	
3500 S DuPont Highway	
Address	
Dover, DE 19901	
City/State and Zip Code	
wlook@incserv.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Westley Look 302	531-0703
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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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
Clifton Building
2661 Executive Center Circle
Tallahassee, Fl. 32301

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STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions	s of section 605.0115, Florida Statutes, the un	dersigned,	
Incorporating Service	es, Ltd.	, hereby resigns as	
	Name of Registered Agent		
Registered Agent for HA	RVES GLOBAL ENTERTAINMENT,	LLC	
	Name of Limited Liability Company		
M2000000619			
Document Nun	ber, if known		
A copy of this resignation	was mailed to the above listed limited liabili	ity company at its last known address.	
The agency is terminated	and the office discontinued on the 31st day a	fter the date on which this statement is filed.	
If signing on behalf of an	Signature of Resigning Ager	ambaut	
	Amanda Archambault	C 3	
	Typed or Printed Name	7 1	
	Assistant Secretary		
	Capacity	PM 12: 35	
	FILING FEES: \$ 85.00 Active limited liability \$ 25.00 Administratively dissort withdrawn limited liability	/ company slved/ voluntarily dissolved/ bility company	

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