N1600000/322

. <u>·</u> (Re	questor's Name)				
(Ad	dress)				
(Ad	dress)				
(Cit	ty/State/Zip/Phone	<i>#</i>)			
PICK-UP	WAIT	MAIL			
(Bu	siness Entity Nam	ne)			
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					





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R. WHITE ES/ 0.7 2019



COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJI	ECT:		
	Name of Lir	nited Liability	Company
DOCU	JMENT NUMBER: N16000001322		
The en for tili	closed Resignation of Registered Agent ng.	for a Limited	Liability Company and fee are submitted
Please	return all correspondence concerning thi	is matter to tl	ne following:
United	d States Corporation Agents, Inc.		
	Name of Person		
Legal	zoom.com, Inc.		
	Name of Firm/Company		
9900	Spectrum Dr.		
	Address		
Austin	n, TX 78717		
	City/State and Zip Code		
E-	mail address: (to be used for future annual report	(notification)	
For fur	ther information concerning this matter.	please call:	
Kasar	ndra Lund	1 800	773-0888 x3951
	Name of Person	Area Code) Daytime Telephone Number
liabilit	ed is a check made payable to the Florid y company or \$25.00 for an administrativ y company,	a Departmen vely dissolve	of State for \$85.00 for an active limited d, voluntarily dissolved or withdrawn limite
MAIL	ING ADDRESS:	STREI	T ADDRESS:

Registration Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

INHS17 (2/14)

Registration Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provis	ions of section 605.0115, Florida Sta	itutes, the undersigned.			
United States Corporation Agents, Inc. , hereby re			ne na		
			y resigns as		
Registered Agent for	Gift With A Pink Ribbon, Inc.				- -
	Name of Limited Liability Co	ompany			_·
N16000001322					
Document	Number, if known				
A copy of this resigna	tion was mailed to the above listed li	mited liability company at its	last known	address	
The agency is termina	ted and the office discontinued on the $\bigcap \bigwedge \bigwedge \bigwedge$	e 31st day after the date on w	thich this sta	tement i	s filed.
	Signature of R	esigning Agent			
It signing on behalf of	an entity:				
	Cheyenne Moseley				
	Typed or Printed 3	Name		261	
	Asst. Secretary for United States (Corporation Agents, Inc.	1	2019 APR	-7*E-7
	Cupacity			¥ 25	•
	S 25.00 Administra	ted liability company tively dissolved/voluntarily limited liability company	;] dissolved/;.	PH 12: 17	- C-2

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