N22000008140

(Re	questor's Name)			
(Ad	dress)			
DAJ	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	MAIT	MAIL		
	siness Entity Nar	ne)		
ua)	isiliess Elluty Mai	ne)		
(Do	cument Number)			
Certified Copies Certificates of Status				
Special Instructions to	Filing Officer:			

Office Use Only



400402184364

2023 FEB 22 AM 9: 16 SECRETARY OF SIME

"" 3 0 2023 D CUSHING

COVER LETTER

то:	Amendment Section Division of Corporations				
SUBJI	_{ECT:} HoneyBrooke Inc				
	(Name of Corporati	on)			
DOCU	JMENT NUMBER: N22000008140				
The en	closed Resignation of Registered Agent for a Corpora	ation and fee are submitted for	filii	ng.	
Please	return all correspondence concerning this matter to the	ie following:			
Unit	ed States Corporation Agents, Inc.				
	(Name of Person)				
Leg	alzoom.com, Inc.				
	(Name of Firm/Company)	ن ۱ د ۶ در	2) 11 15	2023	
990	0 Spectrum Dr.	;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;	わ な さ	2023 FEB	**************************************
	(Address)	: 12 12 13 14	ξ ζ	22	i arin
Aus	stin, TX 78717			Ē	
	(City/State and Zip Code)			9	u e e
For fur	ther information concerning this matter, please call:		1	9	
	800	773-0888			
	41.1	& Daytime Telephone Number)			

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the p	provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617	7.1509.			
Florida Statutes,	Florida Statutes, the undersigned, United States Corporation Agents, Inc.				
	(Name of Registered Agent)				
hereby resigns a	s Registered Agent for HoneyBrooke Inc				
	(Name of Corporation)				
N2200000	8140				
(Documen	t Number, if known)				
A copy of this re	esignation was mailed to the above listed corporation at its last known	own ado	lress.		
The agency is ter this statement is	rminated and the office discontinued on the 31st day after the date filed.	on whi	ch		
	(Signature of Resigning Agent)	co.	2(
	(Signature of Resigning Agent)	퓛띉	23		
If signing on behalf of an entity:			2023 FEB 22	2. A.	
	Cheyenne Moseley		22 AM		
(Typed or Printed Name)					
			ب	التعددات	
	Asst. Secretary for United States Corporation Agents, Inc.	, <u></u>	9		
	(Capacity)				

Fee for filing this document:

\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

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