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tsemones AGD

Michael G. Adams Kentucky Secretary of State Received and Filed: 11/10/2022 2:36 PM Fee Receipt: \$0.00



## COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

Division of Business Filings P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Statement of Resignation of Registered Age (Domestic or Foreign Business Entity)	nt SRA
	KRS Chapter 14A and 271B, 273, 274, 275, 362 or 386, the undand, for that purpose, submits the following statements:	dersigned applies for
<sub>1. I,</sub> Legalinc Corpor	ate Services, Inc.	, do hereby
resign as registered age		
2. The business entity which I a	m resigning from is EXUBERANT LASHES LLC	,
•	(The name must be identical to the name on record with t	he Secretary of State.)
x a limite a limite	oration (KRS 271B, KRS 273 or KRS 274); and liability company (KRS 275); and partnership (KRS 362); and liability partnership (KRS 362);	
4. The business entity was orga	nized and exists in the state or country of Kentucky	·
5. The mailing address of the re	esigning agent:	
9900 Corporate Campus D	Or. Ste 3000 Louisville KY	40223
Street Address or Post Office Box Nu	<del></del>	Zip
the date on which the statem	all be terminated and the registered office discontinued, if so provided ent is filed.  y under the laws of Kentucky that the forgoing is true and correct.	, on the 31 <sup>st</sup> day after
ala For	Eint Hoddon	vember 1, 2022
Signature of Registered Agent	nature of Registered Agent Printed Name Dat	