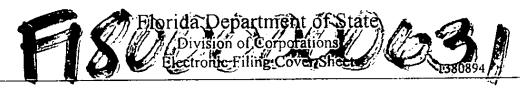
Division of Corporations



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From:

Account Name : PARASEC

Account Number : I20180000086 Phone : (916)576-7000 Fax Number : (800)603-5868

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

rlsos@parasec.com

REGISTERED AGENT RESIGNATION 3 TWELVES, INC.

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COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJ	3 TWELVES, INC ECT:	
	(Name of Corporat	ion)
DOC	JMENT NUMBER: F18000000631	
The ci	nclosed Resignation of Registered Agent for a Corpor	ation and fee are submitted for filing.
Please	return all correspondence concerning this matter to t	he following:
Jason F	Batalia	
	(Name of Person)	-
Parasec		
	(Name of Firm/Company)	•
2804 G	ateway Oaks Dr # 100	
	(Address)	•
Sacrair	nento, Ca 95833	
	(City/State and Zip Code)	-
For fu	rther information concerning this matter, please call:	
Jason E		533-7272
	(Name of Person) (Area Code	: & 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2023 JU'. -2 PH 2: 28

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

	ions 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned	Rocket Lawyer Corporate Services LLC
riorida Statutes, the andersignes,	(Name of Registered Agent)
hereby resigns as Registered Ager	3 TWELVES, INC.
nereby resigns as registered Agei	(Name of Corporation)
F18000000631	
(Document Number, if known)	
A copy of this resignation was ma	ailed to the above listed corporation at its last known address.
The agency is terminated and the this statement is filed.	office discontinued on the 31st day after the date on which
J.He	(Signature of Resigning Agent)
If signing on behalf of an entity:	
Leticia Herrera	
	(Typed or Printed Name)
Assistant Sccretary	
	(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

(((H20000 Z061583)))