

12/000047073

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

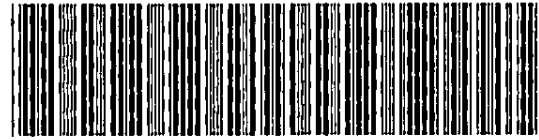
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300373095043

09/20/21--01037--001 \*\*15240.00

SECRETARY (STATE  
TALLAHASSEE)  
2021 OCT 19 AM 9:04  
F. H. J. J.

# STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

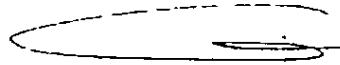
MJ Taxes and More Inc \_\_\_\_\_ hereby resigns as  
Name of Registered Agent

Registered Agent for 1st Response EMS Services LLC  
\_\_\_\_\_  
Name of Limited Liability Company

L21000047073  
Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.



\_\_\_\_\_  
Signature of Resigning Agent

If signing on behalf of an entity:

Coral Lopez-Castro, Esq.  
Typed or Printed Name  
Court-appointed Receiver for MJ Taxes and More  
Capacity

**FILING FEES:**

\$ 85.00 Active limited liability company  
\$ 25.00 Administratively dissolved/ voluntarily dissolved/  
withdrawn limited liability company

FILED  
2021 OCT 19 AM 9:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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