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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : PARASEC

Account Number : I20180000086 Phone : (916)576-7000

: (800)603-5868 Fax Number

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 Email Address:

REGISTERED AGENT RESIGNATION VETERAN HERBS INC.

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COVER LETTER

TO: Amendment Section Division of Corporations	
VETERAN HERBS INC. SUBJECT:	
(Name of Corpora	ation)
DOCUMENT NUMBER: P19000028575	
The enclosed Resignation of Registered Agent for a Corpo	ration and fee are submitted for filin
Please return all correspondence concerning this matter to	the following:
Jason Batalla	
(Name of Person)	_
Parasec	
(Name of Firm/Company)	-
2804 Gateway Oaks Dr # 100	
(Address)	-
Sacramento, Ca 95833	
(City/State and Zip Code)	-
For further information concerning this matter, please call:	
Jason Batalla 800	533-7272
(Name of Person) (Area Coc) le & 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

To: 18506176383 From: 19165767051 Date: 05/22/20 Time: 3:35 PM Page: 04/04

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 6	07.0503(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, Rock	tet Lawyer Corporate Services LLC (Name of Registered Agent)
hereby resigns as Registered Agent for	VETERAN HERBS INC.
netery resigns as registered rigore to	(Name of Corporation)
P19000028575	
(Document Number, if known)	
A copy of this resignation was mailed t	o the above listed corporation at its last known address.
this statement is filed.	e discontinued on the 31st day after the date on which Office ignature of Resigning Agent)
If signing on behalf of an entity:	
Leticia Herrera	ALLA ALLA
	(Typed or Printed Name)
Assistant Secretary	Constitution of the Consti
	(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

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/ H Z0000 1488113)