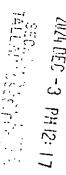
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(Re	equestor's Name)			
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COVER LETTER

	nendment Section vision of Corporations			
SUBJECT				
	(1	Name of Corpor	ration)	
DOCUME	NT NUMBER: F20000003336			
The enclos	sed Resignation of Registered Age	ent for a Corpo	oration and fee are submitted for	filing.
Please retu	ırn all correspondence concerning	g this matter to	the following:	
JESSICA C	ONNRAD			
	(Name of Person)		<u> </u>	
PARACORI	PINCORPORATED			
	(Name of Firm/Company)		_	
2804 Gatewa	ay Oaks Dr #100			
	(Address)		_	
Sacramento,	CA 95833			
	(City/State and Zip Code)		-	
For further	information concerning this mat	ter, please call	:	
JESSICA CO)NNRAD	800 at (533-7272	
	(Name of Person)	(Area Co	de & 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisio	ns of sections 607.0503(2), 617.0502(2), 607.15	09, or 617.1509,		
Florida Statutes, the unc	dersigned PARACORP INCORPORATED			
Tionad Butteroo, the uni	(Name of Registered Agent)			
hereby resigns as Regist	tored August for RSI SYSTEMS, INC.			
neredy resigns as regis	on)			
F20000003336				
(Document Number	; if known)			
A copy of this resignation	on was mailed to the above listed corporation at i	ts last known address		
The agency is terminate this statement is filed.	d and the office discontinued on the 31st day after	er the date on which		
	<u> </u>	.: 32		
	(Signature of Resigning Agent))24 I		
If signing on behalf of a	n entity:	2024 DEC -3 SECANDAS TRACTOREDAS		
ABIGA	LE PETERSON	V., ⊋		
-	(Typed or Printed Name)	PH 12:		
Asst. So	ecretary for Paracorp Incorporated	J. 7		
	(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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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