

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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## Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509. Florida Statutes, the undersigned, PARACORP INCORPORATED (Name of registered agent) Name of corporation) A copy of this resignation was mailed to the above listed corporation 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:

(Typed or Printed Name)

ASSISTANT SECRETARY FOR PARACORP INCORPORATED (Capacity)

Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved corporation

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