

LO5000087339

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 205-0380

From: Account Name : A 1 A CORPORATE SERVICES, INC.
Account Number : I20010000247
Phone : (800) 494-3124
Fax Number : (305) 675-2811

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07 SEP 17 PM 2:39

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REGISTERED AGENT RESIGNATION

REKRAP COMPANY LLC

RECEIVED
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Resign of RA

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RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

A1A REGISTERED AGENT INC., hereby resigns as
(Name of Registered Agent)

Registered Agent for REKRAP COMPANY LLC

(Name of Limited Liability Company)

L05000087339

(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.

Paul Smith

(Signature of Resigning Agent)

If signing on behalf of an entity:

PAUL SMITH

(Typed or Printed Name)

VICE PRESIDENT

(Capacity)

FILING FEES:

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\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

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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