1080000016775

1
(Requestor's Name)
(Address)
(Address)
(is stress)
1 2
(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

٠.;



100334744451

10/01/19--01002--011 ++250.00

19 SEP 30 FM IZ: 12 19 SEP 30 FM 31 54

O SIMMONS

FLORIDA RESEARCH & FILING SERVICES, INC.

1211 CIRCLE DR

TALLAHASSEE, FL 32301

PH: 850-524-4381

PLEASE FILE THE ATTACHED RESIGNATION OF REGISTERED AGENT FOR:

TPC INTERNATIONAL, LLC

PLEASE RETURN A STAMPED COPY

CK# 8403 OR: \$250.00 (\$25.00 for this filing)

THANK YOU!

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisio	ns of section 605.01	15, Florida Statutes, the	undersigned,			
ATRIUM REGISTERED AGENTS, INC. , hereby r			, hereby resigns a	ereby resigns as		
			, , ,			
Registered Agent for	PC INTERNATION	DNAL, LLC				
	Name of Li	mited Liability Company		·		
L08000016775						
Document No	umber, if known					
A copy of this resignation The agency is terminate If signing on behalf of a	ed and the office disc		y after the date on whi	ist known address.		
RALPH A. NARDI						
		Typed or Printed Name ENT, DIRECTOR Capacity		SO ME		
	FILING \$ 85.00 \$ 25.00	G FEES: Active limited liab Administratively d withdrawn limited	issolved/ voluntarily d	issolved/		

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