

400003088

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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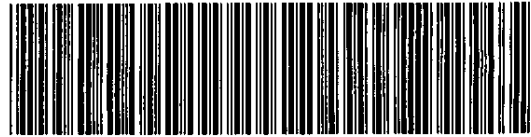
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DEC
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PCB Blast LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L10000030881

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Paul Opore-Twum
Name of Person

PCB Blast LLC
Name of Firm/Company

227 Coquina Shell Way
Address

Panama City Beach, FL 32408
City/State and Zip Code

unknown
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Paul Opore-Twum at (850) 779-7103
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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,

Chad C. McElreath, hereby resigns as
Name of Registered Agent

Registered Agent for PCB Blast, LLC
Name of Limited Liability Company

L10000030881
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.

Chad McElreath
Signature of Resigning Agent

If signing on behalf of an entity:

Chad McElreath
Typed or Printed Name

Capacity

FILING FEES:

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withdrawn limited liability company

FILED
11 JUN 26 PM 12:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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