Fiorida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

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\$85.00

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)694-1639

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_____

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LLC REGISTERED AGENT RESIGNATION CORA GROUP II, LLC

Certificate of Status

Certified Copy

Page Count

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STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

CORPORATE CREATIONS NETWORK, INC. , hereby res Name of Registered Agent Registered Agent for CORA GROUP II, LLC	signs as
Name of Registered Agent	
Registered Agent for CORA GROUP II, LLC	
	,,
Name of Limited Liability Company	
L10000127915	
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 or	which this statement is filed?
	5
/s/ Caitlin Lazarus Signature of Resigning Agent	· •
Signature of Resigning Agent	
If signing on behalf of an entity:	ني. دن.
Caitlin Lazarus	රු. පර
Typed or Printed Name	
Special Secretary	
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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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