## L16000073689

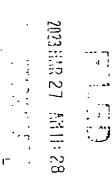
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## **COVER LETTER**

TO: Registration Section Division of Corporations						
SUBJECT: BLOCK G PHASE I, LLC	cof Limited Liabil	ity Company				
DOCUMENT NUMBER: L16000073		ny Company				
The enclosed Resignation of Registered for filing.		ed Liability Company an	nd fee are submitted			
Please return all correspondence concer	ning this matter to	the following:				
SAIDA GALAN						
Name of Person						
PARACORP INCORPORATED						
Name of Firm/Compar	ny	<del></del>				
2804 Gateway Oaks Dr #100						
Address	·	<u> </u>				
Sacramento, CA 95833						
City/State and Zip Coc	le	_				
SGALAN@MYPARACORP.COM						
E-mail address: (to be used for future annu	ual report notification)					
For further information concerning this	matter, please call	:				
SAIDA GALAN	800 at (	533-7272	2023			
Name of Person	Area Coc	533-7272 le Daytime Telephone No	umber S			
Enclosed is a check made payable to the liability company or \$25.00 for an admit liability company.	e Florida Departme nistratively dissol	ent of State for \$85.00 foved, voluntarily dissolved	or an active limited of d or withdrawn limited			
MAILING ADDRESS:		EET ADDRESS:	, , ω			
Registration Section	Registration Section					
Division of Corporations		Division of Corporations				
P.O. Box 6327		on Building  Evenutive Center Circle				
Tallahassee, FL 32314		Executive Center Circle hassee, FL 32301				

## STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

FILING FEES: \$85.00 Active limited liability company \$25.00 Administratively dissolved/ voluntarily dissolved/	Pursuant to the provisions of section 605.011	5, Florida Statutes, the under	rsigned.			
Registered Agent for BLOCK G PHASE I, LLC    Name of Limited Liability Company	PARACORP INCORPORATED		hereby resions as			
Name of Limited Liability Company  L16000073689  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.  Signature of Resigning Agent  ABIGALE PETERSON  Typed or Printed Name  Asst. Secretary for Paracorp Incorporated  Capacity  FILING FEES: \$85.00 Active limited liability company \$25.00 Administratively dissolved/voluntarily dissolved/		11				
Name of Limited Liability Company  L16000073689  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.  Signature of Resigning Agent  ABIGALE PETERSON  Typed or Printed Name  Asst. Secretary for Paracorp Incorporated  Capacity  FILING FEES: \$85.00 Active limited liability company \$25.00 Administratively dissolved/voluntarily dissolved/	Registered Agent for BLOCK G PHASE	I, LLC				
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.  Signature of Resigning Agent  If signing on behalf of an entity:  ABIGALE PETERSON  Typed or Printed Name  Asst. Secretary for Paracorp Incorporated  Capacity  FILING FEES: \$85.00 Active limited liability company \$25.00 Administratively dissolved/ voluntarily dissolved/					<u>_</u> .	
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.  Signature of Resigning Agent  If signing on behalf of an entity:  ABIGALE PETERSON  Typed or Printed Name  Asst. Secretary for Paracorp Incorporated  Capacity  FILING FEES: \$85.00 Active limited liability company \$25.00 Administratively dissolved/ voluntarily dissolved/	Name of Lim	ited Liability Company				
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.  Signature of Resigning Agent  If signing on behalf of an entity:  ABIGALE PETERSON  Typed or Printed Name  Asst. Secretary for Paracorp Incorporated  Capacity  FILING FEES: \$85.00 Active limited liability company \$25.00 Administratively dissolved/ voluntarily dissolved/	L16000073689					
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:  ABIGALE PETERSON  Typed or Printed Name  Asst. Secretary for Paracorp Incorporated  Capacity  FILING FEES: \$ 85.00 Active limited liability company \$ 25.00 Administratively dissolved/ voluntarily dissolved/	Document Number, if known					
Signature of Resigning Agent  If signing on behalf of an entity:  ABIGALE PETERSON  Typed or Printed Name  Asst. Secretary for Paracorp Incorporated  Capacity  FILING FEES: \$85.00 Active limited liability company \$25.00 Administratively dissolved/ voluntarily dissolved/	A copy of this resignation was mailed to the a	bove listed limited liability	company at its last know	n addre:	SS.	
ABIGALE PETERSON  Typed or Printed Name  Asst. Secretary for Paracorp Incorporated  Capacity  FILING FEES: \$85.00 Active limited liability company \$25.00 Administratively dissolved/ voluntarily dissolved/	The agency is terminated and the office disco	ntinued on the 31st day after	r the date on which this s	tatemen	t is file	ed.
ABIGALE PETERSON  Typed or Printed Name  Asst. Secretary for Paracorp Incorporated  Capacity  FILING FEES: \$85.00 Active limited liability company \$25.00 Administratively dissolved/ voluntarily dissolved/		005				
ABIGALE PETERSON  Typed or Printed Name  Asst. Secretary for Paracorp Incorporated  Capacity  FILING FEES: \$85.00 Active limited liability company \$25.00 Administratively dissolved/ voluntarily dissolved/	<del> </del>	Signature of Resigning Agent				
Typed or Printed Name  Asst. Secretary for Paracorp Incorporated  Capacity  FILING FEES: \$85.00 Active limited liability company \$25.00 Administratively dissolved/ voluntarily dissolved/	If signing on behalf of an entity:					
Asst. Secretary for Paracorp Incorporated  Capacity  FILING FEES: \$85.00 Active limited liability company \$25.00 Administratively dissolved/ voluntarily dissolved/	ABIGALE PETE	RSON				
FILING FEES: \$ 85.00 Active limited liability company \$ 25.00 Administratively dissolved/ voluntarily dissolved/	Т	yped or Printed Name				
FILING FEES: \$ 85.00 Active limited liability company \$ 25.00 Administratively dissolved/ voluntarily dissolved/	Asst. Secretary t	for Paracorp Incorporat	ted		202	
FILING FEES: \$ 85.00 Active limited liability company \$ 25.00 Administratively dissolved/ voluntarily dissolved/		Capacity		. ,		-+ i
FILING FEES: \$ 85.00 Active limited liability company \$ 25.00 Administratively dissolved/ voluntarily dissolved/				:	50	=1
	\$ 85.00	Active limited liability co	ompany ed/ voluntarily dissolved ity company	; : : V : : : :	27 (341): 2	. 1 } . 1 }

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