Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ALA REGISTERED AGENT INC.

Account Number : 120000000022 Fhone : (581:/92-2236)
Fax Number : (581:202-3082)

**Enter the email address for this business entity to be used for future annual roport mailings. Enter only one email address please.* ?- ?

Email Address:

LLC REGISTERED AGENT RESIGNATION NPEHT INTERNATIONAL LLC

Certificate of Status	0
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STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provi	sions of section 600.01 for	Figrica Statutes, the underst	gnea,		
ATA REGISTERED AGENT INC			creby resigns as		
	Name of Registered Agent		. •		
Registered Agent for	NPERT INTERNATIONA	I. LLC			
J				,	
<u></u>	Name of Limit	ed Liability Company			
1.18000175639					
Documen	u Nember, if known	_			
A copy of this resign	nation was mailed to the ab	ove listed limited liability co	mpany at its last	known address.	
The agency is termi-	pared and the office discort	tinued on the 31st day after t	he date on which	this statement is filed.	
The agency is term.	/ A	e			
	Ima Un	aki i			
		Signature of Resigning Agent			
If signing on behalf	of an entity:				
	TINA MAKI				
	Ty	ped or Printed Name			
	DP			,	
		Capacity			
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	FILING_I	TEES:			
	\$ 85.00 \$ 25.00	Active limited liability con Administratively dissolved	opany Castumanity disa	·· hearles	
	Q.00,00	withdrawn limited liability	company	2	
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	Make checks payabl	e to Florida Department of St Division of Corporations	ate and mail to:	29 29	
		P.O. Box 6327 Tallahassee, FL 32314		200 至 口	
		Tananassec, FL 52514			
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