# L19000154685

	(R	equestor's Name)	1
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2804 Gateway Oaks Drive #100 Sacramento, CA 95833

Phone 888-272-3725 Fax 800-603-5868

### REFERENCE # MUST BE ON INVOICE TO BE PAID

Date: March 31, 2022

IAE:

Cori Ann Crosthwaite

Vendor # 1960

IEmail:

ccrosthwaite@myparacorp.com

vendor# 130

I Ref Number:

1761180

TO: Florida Department of State
Division of Corporations PO Box 6327

Tallahassee, FL 32314

Return Shipping:

FAX:

850-687-6381

**EMAIL:** 

NAME:

\_\_\_\_

**NEXT LEVEL VAPOR LLC** 

#### FILE REGISTERED AGENT RESIGNATION

State

FL

#### PLEASE EMAIL OR FAX A COPY OF RESULTS

If the document is black and white, please return it to via e-mail and regular mail. If the document has color or any raised seals, please send it via:

CALL IMMEDIATELY IF YOU HAVE ANY QUESTIONS OR THE DEADLINE WILL NOT BE MET 888-272-3725

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

Pursuant to the provisi	ons of section 605.0115, Florida Statutes,	the undersigned,
ROCKET LAWYER CO	, hereby resigns as	
	Name of Registered Agent	,,
Registered Agent for _	NEXT LEVEL VAPOR LLC	
	Name of Limited Liability Company	<u> </u>
L19000154685		
Document N	Number, if known	
A copy of this resignat	ion was mailed to the above listed limited	liability company at its last known address.
The agency is terminat	ed and the office discontinued on the 31st	day after the date on which this statement is filed.
	Edma Vyras	<b>20</b> 2
	Signature of Resignin	g Agent
If signing on behalf of an entity:		; '
EDNA PERRY		-7
	Typed or Printed Name	Services LLC
	Asst. Secretary Rocket Lawyer Corporate	Services LLC
	Capacity	<del></del>
	FILING FEES: \$ 85.00 Active limited lia \$ 25.00 Administratively withdrawn limite	ability company dissolved/ voluntarily dissolved/ ed liability company

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

P.O. Box 6327 Tallahassee, FL 32314