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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: McCarl Holdings LLC
Name of Limited Liability Company

DOCUMENT NUMBER: 860699

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:

Sabrina Montano
Name of Person

Nevada Business Center, LLC
Name of Firm/Company

701 SOUTH CARSON ST. SUITE 200
Address

CARSON CITY, NV 89701
City/State and Zip Code

admin@nvbiz.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Juliana Todd at (307) 459 6120
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$85.00 for an active limited liability company or $25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

Sabrina Montano , hereby resigns as
Name of Registered Agent

Registered Agent for McCarl Holdings LLC

Name of Limited Liability Company

860699
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.

Juliana Todd
Signature of Resigning Agent

If signing on behalf of an entity:

INCORP SERVICES, INC.
Typed or Printed Name

Authorized Signer
Capacity

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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$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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

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