Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000342208 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : PARASEC

Account Number : I20180000086 Phone : (916)576-7000 Fax Number : (800)603-5868

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

Email	Address:	
Fmail	Address:	

LLC REGISTERED AGENT RESIGNATION **BOLD CARRY LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

To: 18506176383 From: 12792140142 Date: 09/28/23 Time: 8:30 FM Page: 03/03

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ons of section 605.0115	5, Florida Statutes, the under	signed,	
ROCKET LAWYER C	ORPORATE SERVICES	LLC	, hereby resigns as	
	Name of Registered Ager		norody romania	
Registered Agent for _	Bold Carry LLC			
	Name of Lim	ited Liability Company	 	,
L2100038129	9			
Document N	Number, if known			
A copy of this resignat	ion was mailed to the a	bove listed limited liability of	company at its last known	address.
The agency is terminal	end and the office discon	ntinued on the 31st day after	the date on which this sta	tement is filed
The agency is terminal	ed and the office disco.	ittilided off the 31st day after	the date on which this sta	tement is med.
	Salna Win			
	LAURILM SUI	Signature of Resigning Agent		
If signing on babalf of	an antitu			
If signing on behalf of	·			
	EDNA PERRY			
	``	yped or Printed Name	1.0	
	Asst. Secretary Rocke	t Lawyer Corporate Services L Capacity	<u></u>	
		Capacity	, -	
				~-
	FILING \$ 85.00 \$ 25.00	FEES: Active limited liability cor Administratively dissolver withdrawn limited liabilit	npany i/ voluntarily dissolved/ y company	2023 5 5 23
	Make checks payab	le to Florida Department of S Division of Corporations P.O. Box 6327	tate and mail to:	V.1110: 43