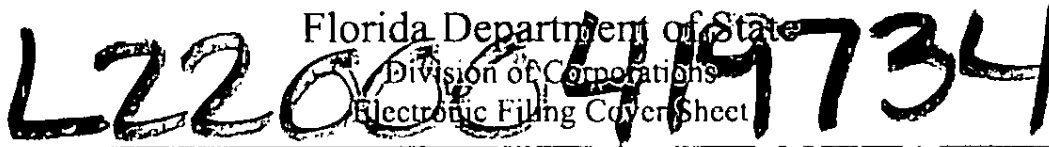


10/5/23, 8:56 AM

Division of Corporations



**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.**

((H23000350124 3)))



H230003501243ABC

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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: \_\_\_\_\_

**LLC REGISTERED AGENT RESIGNATION  
STORM RELIEF PRO LLC**

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

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Corporate Filing Menu

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OCT - 5 2023

K. Brumblay

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

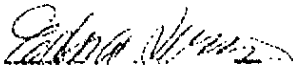
Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,  
ROCKET LAWYER CORPORATE SERVICES LLC  
\_\_\_\_\_, hereby resigns as  
Name of Registered Agent

Registered Agent for Storm Relief Pro LLC  
\_\_\_\_\_  
Name of Limited Liability Company

L22000419734  
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:

EDNA PERRY  
\_\_\_\_\_  
Typed or Printed Name  
Asst. Secretary Rocket Lawyer Corporate Services LLC  
\_\_\_\_\_  
Capacity

APPROVED  
AND  
FILED  
2023 OCT -5 PM 12:34  
CLERK OF THE COURT  
TALLAHASSEE, FLORIDA

### 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withdrawn limited liability company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