

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L23000393017

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Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : PARASEC
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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
ARCANE ARMAMENTS LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$85.00

RECEIVED

2024 AUG 22 PM 12:56

TO: JANE
FROM: JANE
DIVISION OF CORPORATIONS
DATE: 8/22/24

2024 AUG 22 PM 1:51
APPROVED
AND
FILED

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 Arcane Armaments LLC

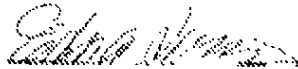
Name of Limited Liability Company

L23000393017

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

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\$ 25.00	Administratively dissolved/voluntarily dissolved/ withdrawn limited liability company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