M03000000181

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: A.R.C ACCOUNTS RECOVERY (U.S.A.) CORPORATION LLC
Name of Corporation

DOCUMENT NUMBER: M03000000181

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kerry Jester
Name of Contact Person

American Incorporators Ltd.
Firm/Company

1013 Centre Road, Suite 403-A
Address

Wilmington, DE 19805
City/State and Zip Code

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

For further information concerning this matter, please call:

Kerry Jester at (302) 421-5752
Name of Contact Person — Area Code & Daytime Telephone Number

Enclosed is a $35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

CR2E045 (04/13)

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

FLORIDA FILING & SEARCH SERVICES
Name of Registered Agent, hereby resigns as

Registered Agent for A.R.C ACCOUNTS RECOVERY (U.S.A.) CORPORATION LLC

Name of Limited Liability Company

M03000000181
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:

Typed or Printed Name

Capacity

2023 DEC 27 AM 8:30

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$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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

INHS17 (2/14)