

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

M12000004963

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To:

Division of Corporations

Fax Number : (950) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (614) 290-3338

Fax Number : (954) 208-0845

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

KLAUSNER LUMBER ONE LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

2022 JAN 28 AM 10:09

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

RECEIVED
FBI ALABAMA
JAN 28 2022

2022 JAN 28 PM 2:47

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,

NRAI SERVICES, INC. _____, hereby resigns as
Name of Registered Agent

Registered Agent for _____
KLAUSNER LUMBER ONE LLC
Name of Limited Liability Company

M12000004963
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:

Kimberly Laughrey
Typed or Printed Name
Assistant Secretary
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withdrawn limited liability company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

APPROVED
AND
FILED
2022 JAN 28 PM 2:47
SECRETARY OF STATE
TALLAHASSEE, FL 32314