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Florida Department of State
Division of Corporations
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To:

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

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Account Name : SALOMON B. ESQUENAZI, P.A.
Account Number : I20130000020
Phone : (954) 989-4995
Fax Number : (954) 989-4991

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

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**LLC REGISTERED AGENT RESIGNATION
JBR SERVICES USA LLC**

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

2019 OCT 23 09:28 AM

2019 OCT 23 AM 9:46
TALLAHASSEE, FLORIDA

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STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

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

Corporate Solutions of South Florida, Inc

Name of Registered Agent

, hereby resigns as

Registered Agent for JBR SERVICES USA LLC

Name of Limited Liability Company

M15000007654

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:

Salomon B. Esquenazi

Typed or Printed Name

Director

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withdrawn limited liability company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

INHS17 (2/14)

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