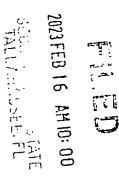
# M1800000 6572

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ldress)	
(Cı	ty/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL MAIL
(Bu	usiness Entity Name)	
(De	ocument Number)	<del></del> <del>-</del>
ep Copies	Certificates o	of Status
ecial Instructions to Fili	ng Officer	

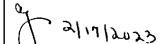
Office Use Only



800402809458







CORPORATION SERVICE COMPANY
1201 Hays Street
Tallbassee Ft 32201

Tallhassee, FL 32301 Phone: 850-558-1500

Pnone: 850-558-1500				
ACCOUNT NO. : 12000000195				
REFERENCE : 422122 8323810				
AUTHORIZATION : SPECIAL COST LIMIT : \$ 85.00 25.00				
COST LIMIT : \$ 85.00 み5.00				
ORDER DATE : January 31, 2023				
ORDER TIME : 10:52 AM				
ORDER NO. : 422122-045				
CUSTOMER NO: 8323810				
ANNUAL PERSENCE CITEDO				
ECPIELO LIDA				
NAME: PARESTONATION				
ECO-SITE TONICY, LLC				
XX RESIGNATION				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING				
CONTACT PERSON: Eyliena Baker-EXT#				
EXAMINER'S INITIALS:				

#### **COVER LETTER**

SUBJECT:  Name of Limited Liability	/ Company
DOCUMENT NUMBER: M18000006572	
The enclosed Resignation of Registered Agent for a Limite for filing.	d Liability Company and fee are submitted
Please return all correspondence concerning this matter to t	he following:
RESIGNATIONS DEPARTMENT	
Name of Person	-
CORPORATION SERVICE COMPANY	
Name of Firm/Company	-
251 LITTLE FALLS DRIVE	
Address	-
WILMINGTON, DE 19808	
City/State and Zip Code	
ANNUALREPORTS@CSCGLOBAL.COM	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
RESIGNATION DEPT 800	927-9801
Name of Person Area Code	Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

#### **Mailing Address:**

OF

Registration Section Division of Corporations

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

### **Street Address:**

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

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

Pursuant to the provis	ions of section 605.0115. Florida Statutes, tl	ne undersigned.	
CORPORATION SERVICE COMPANY		hereby resigns as	
Name of Registered Agent		Hereby resigns as	
Registered Agent for	Eco-Site Tower, LLC		
	Name of Limited Liability Company		·
M18000006572			
Document i	Number, if known		
	rion was mailed to the above listed limited fitted and the office discontinued on the 31st d  Assistant Vice President  Signature of Resigning	lay after the date on which this statemed	ent is filed.
If signing on behalf of	an entity:	202 Sife	
	BY EYLIENA BAKER	2023 FEB 16 SECHLANA TALLANA	= 12
	Typed or Printed Name	EB 16 A	grad Grad
	VICE PRESIDENT	£3*	
	Capacity	AM IO: 00	

Active limited liability company Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

**FILING FEES:** 

\$ 85.00 \$ 25.00