

Pase print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000020931-3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA0000000023 Phone : (614) 280-3338 Fax Number : (614)573-3996

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

Email Address: __cls-agentresignations@wolterskluwer.com

LLC REGISTERED AGENT RESIGNATION CANYON POWER SOLUTIONS, LLC

Certificate of Status	0
Certified Copy	Ü
Page Count	01
Estimated Charge	\$25,00

Electronic Filing Menu Corporate Filing Menu

T. LEMIEUX JAN 17 2024

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

C T CORPORATION SYSTEM Name of Registered Agent		TEM . hereby re	. hereby resigns as	
Registered Agent for				
-	CANYON POW	ER SOLUTIONS, LLC		
	Name of Lim	ited Liability Company		
h41000000000000000000000000000000000000				
M19000009796				
Document N	umber, if known			
A copy of this resignation	on was mailed to the a	bove listed limited liability company a	t its last known address.	
The agency is terminate	of and the office disco	ntinued on the 31st day after the date of	n which this statement is filed	
The agency is terminate				
	Nacc	y Helm - Brown		
		Signature of Resigning Agent		
If signing on behalf of a	ın entity:			
	NANCY HELM-BRO)WN		
		sped or Printed Name		
	·			
	ASSISTANT SECRE	TARY		
	ASSISTANT SECRE	TARY Capacity		
	ASSISTANT SECRE		202	
	ASSISTANT SECRE		2024 J	
	FILING	Capacity FEES:	2024 3577	
	FILING	Capacity FEES:	rily dissolved/	
	FILING	Capacity	rily dissolved/	

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314