## P00000106317

PARACORP INCORPORATED P. O. Box 160568 Sacramento, CA 95816-0568

CR2E031(7/97)

Office Use Only

1,26,01

## CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

	1	1000045936413
	(Corporation Name)	(Document #) *****35.00 *****35.00
<u> </u>	2. (Corporation Name)	(Document #)
==	3. (Corporation Name)	(Document #)
=	4(Corporation Name)	(Document #)
_	☐ Walk in ☐ Pick up time	Certified Copy
	☐ Mail out ☐ Will wait	☐ Photocopy ☐ Certificate of Status
	NEW FILINGS	AMENDMENTS
_	Profit Not for Profit Limited Liability Domestication Other	Amendment  Resignation of R.A., Officer/Director  Change of Registered Agent  Dissolution/Withdrawal  Merger
	OTHER FILINGS	REGISTRATION/QUALIFICATION  REGISTRATION/QUALIFICATION  STORY  ST
	Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other  Examiner's Initials

## RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 607.0	0502(2), 617.0502(2), 607.1509, or 617.1509,		
Florida Statutes, the undersigned,I	PARACORP INCORPORATED		
Plotted Statutos, the underespine,	(Name of registered agent)		
hereby resigns as Registered Agent for	XENACARE CONSULTANT CORPORATION		
neredy resigns as registered rigorities	(Name of corporation)		
A copy of this resignation was mailed to the above listed corporation 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:			
it signing on behalf of all charty.			
	DENISE ZOLLNER		
(Тур	ed or Printed Name)		
	ed or Printed Name)  ASSISTANT SECRETARY  (Capacity)  O NOV 26  ASSISTANT SECRETARY		

Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved corporation

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