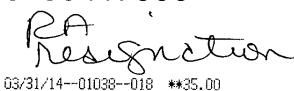
## P04000099672

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Special Instructions to	Filing Officer	
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Office Use Only



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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: JLV HOLDINGS INC. (Name of Corporation)	
Name of Corporation)  DOCUMENT NUMBER: P0400099672	
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for	filing.
Please return all correspondence concerning this matter to the following:	
Stephen Blass (Name of Person)	
Stephen Blass P.A.	
Stephen Blass P.A.  (Name of Firm/Company)  100 SE 2nd Street, Suite 2600	ቱነ
(Address) OSYNA NOVA	ភូ ភ្នំ។ ក្នុ 1
Hiami, FL 33131  (City/State and Zip Code)	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Stephen Blass at 305 377-9353 (Area Code & Daytime Telephone Number)	

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

FILED

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

2814 HAR 31 PM 3: 26

SEE CLICATY OF STATE
Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
riorida Statutes, the undersigned with NOCITE WIR OPERITOR
(Name of Registered Agent)
hereby resigns as Registered Agent for JLV HOLDINGS INC.
(Name of Corporation)
P04000099672
(Document Number, if known)
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:
COPROLITE CORPORATION  BY: STEPHEN A. BLASS
(Typed or Printed Name)
PRESIDENT

Fee for filing this document:

\$87.50 - Active Corporation
\$35.00 - Administratively dissolved/voluntarily dissolved/
withdrawn corporation

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

(Capacity)