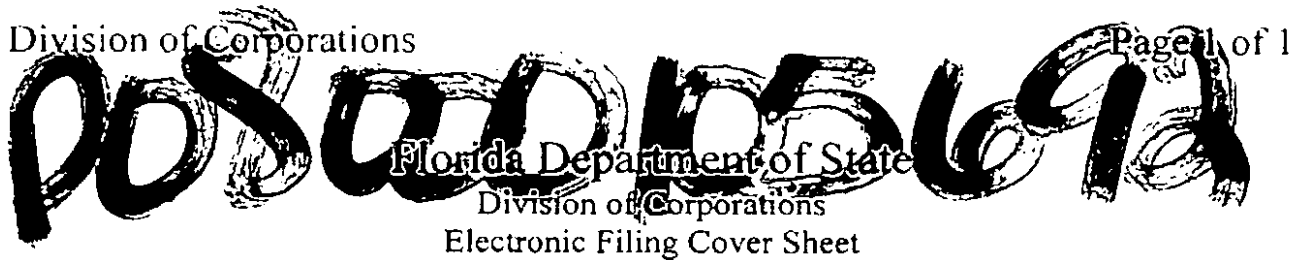


Division of Corporations

Page 1 of 1



Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please 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.**

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To:

Division of Corporations  
Fax Number : (850) 617-6380

From:

Account Name : BRANT, REITER, MCCORMICK & JOHNSON, P.A.  
Account Number : I20040000043  
Phone : (904) 358-2750  
Fax Number : (904) 353-1166

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**Email Address:** \_\_\_\_\_

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**REGISTERED AGENT RESIGNATION  
STELLAR RECOVERY, INC.**

Certificate of Status	0
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Page Count	02
Estimated Charge	\$35.00

AUG 30 2018

S. YOUNG

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### COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** STELLER RECOVERY, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** P08000105692

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:

AMY H. JOHNSON, ESQ.  
(Name of Person)

BRANT, REITER, MCCORMICK & JOHNSON, P.A.  
(Name of Firm/Company)

135 WEST BAY STREET, SUITE 400  
(Address)

JACKSONVILLE, FL 32202  
(City/State and Zip Code)

For further information concerning this matter, please call:

REBECCA CANALES, PARALEGAL at ( 904 ) 366-2384  
(Name of Person) (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

H18000253760 3

**RESIGNATION OF REGISTERED AGENT  
FOR A CORPORATION**


Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,  
Florida Statutes, the undersigned, BRANT, REITER, MCCORMICK & JOHNSON, P.A.  
(Name of Registered Agent)

hereby resigns as Registered Agent for STELLER RECOVERY, INC.  
(Name of Corporation)

P08000105692  
(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:

AMY H. JOHNSON, ESQ.  
(Typed or Printed Name)

VICE-PRESIDENT  
(Capacity)

**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  
Tallahassee, FL 32314

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18 AUG 29 AM 9:33  
TALLAHASSEE, FLORIDA

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