P16 000 023 241

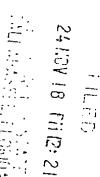
| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| |
| (Document Number) |
| ertified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
| |
| |
| |
| |
| |
| i |
| <u> </u> |

Office Use Only



700439499687

11/18/24--01019--020 **35.00



COVER LETTER

| Division of Corporations | |
|--|---|
| SUBJECT: PAUL BLANCO'S | GOOD CAR COMPANY ORLANDO |
| D1000 | (Name of Corporation) |
| DOCUMENT NUMBER: P1600 | 0023241 |
| The enclosed Resignation of Registe | ered Agent for a Corporation and fee are submitted for filing. |
| Please return all correspondence cor | neerning this matter to the following: |
| Mariah Escobedo | |
| (Name of Perso | on) |
| PARACORP INCO | RPORATED |
| (Name of Firm/Cor | npany) |
| PO BOX 160568 | |
| (Address) | |
| SACRAMENTO CA | 95833 |
| (City/State and Zip | Code) |
| For further information concerning t | his matter, please call: |
| Mariah Escobedo | _{at (} 800_ ₎ 533.7272 |
| (Name of Person) | (Area Code & Daytime Telephone Number) |
| Enclosed is a check made payable to or \$35.00 for an administratively dis | the Florida Department of State for \$87.50 for an active corporation solved, voluntarily dissolved or withdrawn corporation.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 |

TO:

Amendment Section

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

| Pursuant to the pro | visions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509, e undersigned, PARACORP INCORPORATED | |
|--|---|-------|
| | (rathe of registered registry | |
| havahu vaniona aa D | Registered Agent for PAUL BLANCO'S GOOD CAR COMPANY ORLAND | 00 |
| nereby resigns as N | (Name of Corporation) | |
| P160000232 | 241 | |
| (Document N | umber, if known) | |
| A copy of this resig | gnation was mailed to the above listed corporation at its last known addr | ess. |
| The agency is term this statement is fil | inated and the office discontinued on the 31st day after the date on whiced. | h |
| _ | (Signature of Resigning Agent) | |
| If signing on behal | f of an entity: | |
| A | Abby Peterson | |
| _ | (Typed or Printed Name) | 27. |
| A | ASST. SECRETARY FOR PARACORP INCORPORATED | |
| _ | (Capacity) | FILLD |
| | Fee for filing this document: | |
| | \$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ | |

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

withdrawn corporation