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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC

Account Number: 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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

| Email | Address: | | | |
|-------|----------|--|--|--|

REGISTERED AGENT RESIGNATION BLOOM'S RESTAURANT, INC.

| Certificate of Status | 0 |
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RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

| Pursuant to the provisions of section | ns 607.0503(2), 617.0502(2), 607.1509, | , or 617.1509, | | | |
|---------------------------------------|---|-----------------------------|--|--|--|
| Florida Statutes, the undersigned, _ | eResidentAgent, Inc. | | | | |
| | (Name of Registered Ager | ot) | | | |
| hereby resigns as Registered Agent | Bloom's Restaurant, Inc. | | | | |
| The conjugate and regimened regime | (Name of Corporation) | | | | |
| P20000049452 | | | | | |
| (Document Number, if known) | | | | | |
| A copy of this resignation was maile | ed to the above listed corporation at its | last known address. | | | |
| The agency is terminated and the of | fice discontinued on the 31st day after t | the date on which | | | |
| this statement is filed | | | | | |
| S A | 1 | | | | |
| | (Signatule of Resigning Agent) | | | | |
| If signing on behalf of an entity: | | | | | |
| Jeffrey A. Unger | г | 2021 SEP SECRETA | | | |
| | (Typed or Printed Name) | | | | |
| | | | | | |
| President of eResi | dentAgent, Inc. | <u> </u> | | | |
| | (Capacity) | 1 0 D | | | |
| | | $\frac{1}{2}$ $\frac{1}{3}$ | | | |

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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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