## P2100065302

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer: AdMMStrative Dissolution				
For Annual Report				



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09/13/23--01011--008 \*\*35.00

2023 SEP 13 AH 6: 40

Office Use Only

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#### **COVER LETTER**

TO:	Amendment Section Division of Corporations
SUBJ	ESM DEV CORP.
	(Name of Corporation)
DOC	UMENT NUMBER: P21000065302
The e	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing
Please	e return all correspondence concerning this matter to the following:
RA	CHEL SCHOTT
	(Name of Person)
PA	RACORP INCORPORATED
	(Name of Firm/Company)
PC	BOX 160568
	(Address)
SA	CRAMENTO CA 95833
	(City/State and Zip Code)
For fi	orther information concerning this matter, please call:
RA	CHEL SCHOTT800 \533.7272

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

(Name of Person)

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

# RESIGNATION OF REGISTERED AGENT FILED FOR A CORPORATION 2023 SEP 13 AM 6: 40

		5. 4
Pursuant to the provisions of sect	ions 607.0502(2), 617.0502(2), 607.1: PARACORP INCORPORAT	509, or 617,1509,
Florida Statutes, the undersigned.	PARACORP INCORPORAT	ED 流流性
. , , , , , , , , , , , , , , , , , , ,	(Name of Registered	Agent)
hereby resigns as Registered Age	nt for ESM DEV CORP.	
	(Name of Corporat	ion)
P21000065302		
(Document Number, if known)	<del></del>	
A copy of this resignation was ma	ailed to the above listed corporation at	its last known address.
The agency is terminated and the this statement is filed.	office discontinued on the 31st day af	ter the date on which
<u></u>	(Signature of Resigning Agent)	

If signing on behalf of an entity:

### ABIGALE PETERSON

(Typed or Printed Name)

ASST. SECRETARY FOR PARACORP INCORPORATED

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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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



October 6, 2023

RACHEL SCHOTT PO BOX 160568 SACRAMENTO, CA 95833

SUBJECT: ESM DEV CORP. Ref. Number: P21000065302

We have received your document for ESM DEV CORP, and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your entity is currently inactive for administrative dissolution for annual report.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 723A00023178

Anissa Butler Regulatory Specialist II

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