

P 21 000 065 504

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

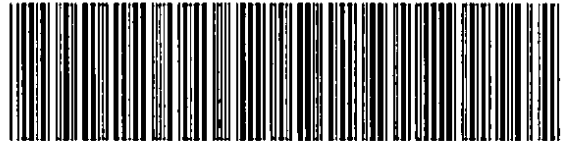
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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09/06/22--01029--019 \*\*25.00

01/03/23--01006--001 \*\*10.00

FILED

2022 DEC 27 AM 9:10



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

2022 DEC 27 PM 3:57

December 8, 2022

CORI ANN CROSTHWAITE  
2804 GATEWAY OAKS DRIVE #100  
SACRAMENTO, CA 95833

SUBJECT: NICARDI INC.  
Ref. Number: P21000065504

We have received your document for NICARDI INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a LIMITED LIABILITY COMPANY, but your entity is a CORPORATION. Please complete and return the enclosed blank form(s).

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan  
Regulatory Specialist III

Letter Number: 422A00027279



2804 Gateway Oaks Drive #100 Sacramento, CA 95833

Phone 888-272-3725 Fax 800-603-5868

**REFERENCE # MUST BE ON INVOICE TO BE PAID**

Date: August 31, 2022

Vendor # 1960

TO: Florida Department of State  
Division of Corporations PO Box 6327  
Tallahassee, FL 32314

FAX: 850-687-6381

EMAIL:

AE: Cori Ann Crosthwaite

Email: ccrosthwaite@myparacorp.com

Ref Number: 1841237

Return Shipping:

NAME: **NICARDI INC.**

**FILE REGISTERED AGENT RESIGNATION**

State County

FL

**PLEASE EMAIL OR FAX A COPY OF RESULTS**

**If the document is black and white, please return it to via e-mail and regular mail. If the document has color or any raised seals, please send it via:**

**CALL IMMEDIATELY IF YOU HAVE ANY QUESTIONS OR THE DEADLINE WILL NOT BE MET  
888-272-3725**

FILED

2022 DEC 27 AM 9:1

TALLAHASSEE, FL

**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, Rocket Lawyer Corporate Services LLC

(Name of Registered Agent)

hereby resigns as Registered Agent for Nicardi Inc.

(Name of Corporation)

P21000065504

(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:

EDNA PERRY

(Typed or Printed Name)

Asst. Secretary for Rocket Lawyer Corporate Services LLC

(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**