P22000012530

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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COVER LETTER

TO:	Amendment Section Division of Corporations
CHDI	CRACKERJACK INVESTERS CORP.
30B.	(Name of Corporation)
DOC	UMENT NUMBER: P22000012530
The e	enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing
Pleas	e return all correspondence concerning this matter to the following:
Travis	s Crabtree
	(Name of Person)
LEGA	ALCORP SOLUTIONS, LLC
	(Name of Firm/Company)
3 Gree	enway Plaza #1320
	(Address)
Houst	on. TX 77046
	(City/State and Zip Code)
For f	urther information concerning this matter, please call:
Legal	Corp Solutions, LLC 888 534-3018 at ()
	(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

		7.0503(2), 617.0502(2), 607.1509, or 61	7.1509,
Florida Statutes	, the undersigned, LEGAL	LCORP SOLUTIONS, LLC	
	, ,	(Name of Registered Agent)	
hereby resigns	is Registered Agent for $\stackrel{ extstyle C}{=}$	RACKERJACK INVESTERS CORP.	
nereby resigns a	is registered Agent for _	(Name of Corporation)	
P22000012530			
(Docume	nt Number, if known)	_	
A copy of this r	esignation was mailed to	the above listed corporation at its last kr	nown address.
The agency is to this statement is		discontinued on the 31st day after the dat	e on which
	(Sign	nature of Resigning Agent)	_
If signing on be	half of an entity:		
	Travis Crabtree		63
	(T	yped or Printed Name)	DZ4 S
	Member		SEP I
	· · · · · · · · · · · · · · · · · · ·	(Capacity)	Mc > II
			R 8: 50
			A
If signing on be	half of an entity: Travis Crabtree (T Member	yped or Printed Name)	2024 SEP 16 AM 8: 50 TÄLLÄHÄSSEE FLORIDA

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

withdrawn corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/