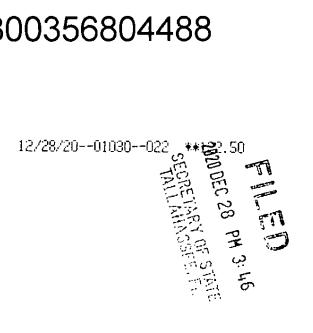
P96 0000 52702

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COVER LETTER

| 10: | Division of Corporations |
|----------|---|
| SUBII | Paramount Power, INC. |
| 5050 | (Name of Corporation) |
| DOCL | JMENT NUMBER: P96000052702 |
| The en | nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing. |
| Please | return all correspondence concerning this matter to the following: |
| Solomo | on Sarway |
| | (Name of Person) |
| Paramo | ount Power INC |
| | (Name of Firm/Company) |
| 7855 12 | 26th Ave N |
| | (Address) |
| Largo, I | FL 33773 |
| | (City/State and Zip Code) |
| For fur | rther information concerning this matter, please call: |
| Solomo | on Sarway 727 536-9979 at () |
| | (Name of Person) at () (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 2020 DEC 28 PM 3: 46

| SECRETARY OF STATE TALL AND STATE Pursuant to the provisions of sections 607.0503(2), 617.0502(2), 607.1509, or 617.1509. |
|---|
| Pursuant to the provisions of sections 607.0503(2), 617.0502(2), 607.1509, 67.617:1509, |
| Florida Statutes, the undersigned, Patrick Liebel |
| (Name of Registered Agent) |
| nereby resigns as Registered Agent for Paramount Power Inc. |
| (Name of Corporation) |
| P96000052702 |
| (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 his statement is filed. (Signature of Resigning Agent) f signing on behalf of an entity: |
| r signing on benait of an entity. |
| (Typed or Printed Name) |
| (Typed of Timed Name) |

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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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

(Capacity)