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Michael G. Adams Kentucky Secretary of State Received and Filed: 1/19/2024 3:03 PM Fee Receipt: \$0.00



COMMONWEALTH OF KENTUCKY ALISON LUNDERGAN GRIMES, SECRETARY OF STATE

Division of Business Filings Business Filings PO Box 718 Frankfort, KY 40602	Statement of Resignation of Register (Domestic or Foreign Business Entity)	ered Agent	SRA
(502) 564-3490 www.sos.ky.gov			
	KRS Chapter 14A and 271B, 273, 274, 275, 362 and, for that purpose, submits the following statement		gned applies for
1. I, NATIONAL REGISTERE	ED AGENTS, INC.		, do hereby
◯ resign as registered age	ent; and/or		
	THE VICTORIAN PAP	PER COMPANY	Y
2. The business entity which I a	(The name must be identical to the name		
3. The business is: a corpo	oration (KRS 271B, KRS 273 or KRS 274);		
☐ a limite	ed liability company (KRS 275);		
a limite	ed partnership (KRS 362);		
a limite	ed liability partnership (KRS 362); or		
a busir	ness trust (KRS 386)		
4. The business entity was orga	anized and existing in the state or country of $\underline{ ext{Missouring}}$	i	·
5. The mailing address of the re	esigning agent:		
306 West Main Street Suite 512	Frankfort	KY	40601
Street Address or Post Office Box Nu	imbers City	State	Zip
6. The agency appointment sha the date on which the statement	all be terminated and the registered office discontinue t is filed.	ed, if so provided, on	the 31 st day after
I declare under penalty of perjur	ry under the laws of Kentucky that the forgoing is true	and correct.	
By: Kindal Jaughey	Kimberly Laughrey - Assistan	nt Secretary Mar 6,	2023
Signature of Registered Agent	Printed Name	Date	