# F180000 4808

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





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#### **COVER LETTER**

lame of Corp	poration)
ent for a Co	rporation and fee are submitted for filing
this matter	to the following:
_	<del></del>
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ter, please o	eall:
360 at (	956-9500 EXT 102 ) Code & Daytime Telephone Number)
(Area	Code & Daytime Telephone Number)
	ent for a Co this matter

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

Pursuant to the provisions of secti	ions 607.0503(2), 617.0502(2), 607.1509, or 613	7.1509,
Florida Statutes, the undersigned,	UNISEARCH, INC.	
, rotten Statement and annual Branch	(Name of Registered Agent)	
hereby resigns as Registered Ager	LINX CARD, INC.	
neredy resigns as registered rige.	(Name of Corporation)	
F18000004808		
(Document Number, if known)		
A copy of this resignation was ma	ailed to the above listed corporation at its last kn	nown address.
The agency is terminated and the this statement is filed.	office discontinued on the 31st day after the dat	e on which
Cenni	(Signature of Resigning Agent)	_
If signing on behalf of an entity:		2020 11:1 22
UNISEARCH, INC	C	
<del></del>	(Typed or Printed Name)	
		Pil 2:
ASSISTANT SEC	RETARY	2:

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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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