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| (Re | questor's Name) | |
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| , (Ad | dress) | |
| (Ad | dress) | |
| (Cit | y/State/Zip/Phone | <i>⇒ #</i>) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nar | ne) |
| (Do | cument Number) | |
| Certified Copies | Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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)4 AUS 23 PM 4: 05
SECRETARY OF STATE
ALLAHASSEE, HARRIDA

OFFICER / DIRECTOR RESIGNATION FILED FOR A CORPORATION

04 AUG 23 PM 4: 06

SECRETARY OF STATE TALLAHASSEE, FLORIDA

| I, | Alexander Vega | hereby resign as | Director-Secretary |
|-------------|-----------------------------|--|------------------------------|
| -, <u>-</u> | | , noteby rough us_ | (Title) |
| of_ | | | , Inc. |
| | (Name | of Corporation) | |
| | (Document Number, if known) | , a corporation organized unc | ler the laws of the State of |
| | Florida | _• | |
| | | <u>-</u> . | |
| | | | |
| | | | : , ! |
| | | | |
| | (<u>S</u> | signature of resigning officer/directe | br) |

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

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