(Rec	questor's Name)	
(Add	iress)	
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(Ĉity	//State/Zip/Phone	<del></del>
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JUI 22 7021 ! ALBRITTON CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 920580 8323810

AUTHORIZATION : CARACTERIST

COST LIMIT : \$ 87.50

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ORDER DATE : July 21, 2021

ORDER TIME : 10:36 AM

ORDER NO. : 920580-005

CUSTOMER NO: 8323810

\_\_\_\_\_

CHANGE OF AGENT

NAME: FLYWHEEL SPORTS, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Unassigned

EXAMINER'S INITIALS:

#### **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT:	
(Name of Corpora	ition)
DOCUMENT NUMBER: F11000000250	
The enclosed Resignation of Registered Agent for a Corpo	ration and fee are submitted for filing.
Please return all correspondence concerning this matter to	the following:
RESIGNATION DEPARTMENT	
(Name of Person)	_
CORPORATION SERVICE COMPANY	
(Name of Firm/Company)	_
251 LITTLE FALLS DRIVE	
(Address)	_
WILMINGTON, DE 19808	
(City/State and Zip Code)	_
For further information concerning this matter, please call:	
RESIGNATION DEPARTMENT 800 at (	927-9801
(Name of Person) (Area Cod	_) e & 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

Pursuant to the provisions of sections	s 607.0503(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned.	DRPORATION SERVICE COMPANY
	(Name of Registered Agent)
hereby resigns as Registered Agent for	FLYWHEEL SPORTS, INC.
nereby resigns as registered Agent for _	(Name of Corporation)
F11000000250	
(Document Number, if known)	<del></del>
A copy of this resignation was mailed	d to the above listed corporation at its last known address.
The agency is terminated and the offithis statement is filed.	ce discontinued on the 31st day after the date on which
	Eylina Bahor
	(Signature of Resigning Agent)
If signing on behalf of an entity:	(Typed or Printed Name)  A
BY EYLIENA BAKEF	
	(Typed or Printed Name)
VICE PRESIDENT	
	(Capacity)

## 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