F11000001753

(Requ	iestor's Name)
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(City/s	State/Zip/Phor	ne #)
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. (Busin	ness Entity Na	me)
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Certified Copies	Certificate	es of Status
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SECRETARY OF STATE OF CORPORATIONS

JUN 10 2013

T. BROWN

COVER LETTER

METADIGM SERVICES, INC. (Name of Corporation) DOCUMENT NUMBER: F11000001753 The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ROBIN MOLT (Name of Person) Corporaiton Service Company (Name of Firm/Company) 80 State Street (Address) Albany NY 12207 (City/State and Zip Code)	Division of Corporations	
(Name of Corporation) DOCUMENT NUMBER: F11000001753 The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ROBIN MOLT (Name of Person) Corporaiton Service Company (Name of Firm/Company) 80 State Street (Address) Albany NY 12207	SUBJECT: METADIGM SERVICES, INC.	
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(Name of Person) Corporaiton Service Company (Name of Firm/Company) 80 State Street (Address) Albany NY 12207	Please return all correspondence concerning this matter to t	he following:
Corporaiton Service Company (Name of Firm/Company) 80 State Street (Address) Albany NY 12207	ROBIN MOLT	
(Name of Firm/Company) 80 State Street (Address) Albany NY 12207	(Name of Person)	-
80 State Street (Address) Albany NY 12207		_
Albany NY 12207	(Name of Firm/Company)	
Albany NY 12207	80 State Street	
	(Address)	-
(City/State and Zip Code)	Albany NY 12207	
	(City/State and Zip Code)	-
For further information concerning this matter, please call:	For further information concerning this matter, please call:	
Robin Molt (Name of Person) at (518) 433-7018 ext 60311 (Area Code & Daytime Telephone Number)	at (- · -	433-7018 ext 60311 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327

Tallahassee, FL 32314





Pursuant to the provisions of section	ons 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned,	Corporation Service Company
	(Name of Registered Agent)
hereby resigns as Registered Agent	for METADIGM SERVICES, INC.
nereby resigns as registered regen	(Name of Corporation)
F11000001753	
(Document Number, if known)	
A copy of this resignation was mai	led to the above listed corporation at its last known address.
this statement is filed.	Service Company (Signature of Resigning Agent)
If signing on behalf of an entity:	
Robin Molt	
	(Typed or Printed Name)
asst secret	ary
	(Canacity)

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