F13000001256

(Re	equestor's Name)	
(Ac	idress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	:#)
PICK-UP	WAIT	MAIL
(Ř.	usiness Entity Nam	(e)
(Di	Jamesa Enaky Ham	ic,
(D	ocument Number)	
Certified Copies	Certificate	es of Status
Special Instructions to Fili	ng Officer:	
		j
		J. HO.
		CE TORNE
	•	J HORNE SEP 2 4 2024
		4024

Office Use Only



400436845924

FILED 2024 SEP 23 MM 9: 25

7024 SEP 23 PM 3: 39



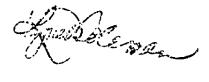
To: Department Of State, Division Of Corporations

From: Amanda Miller

Ext: x62969 Date: 09/23/24

Order #: 1621871-14 Re: Amazigh, Inc.

Processing Method: Routine



TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Agent Resignation

Amount to be deducted from our State Account: \$87.50 - FL State Account Number:

12000000195

Please take the following action:

File in your office on basis Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

(Name of Person) (Area Coo	de & Daytime Telephone Number)
RESIGNATION DEPARTMENT 800 at (927-9801
For further information concerning this matter, please call	:
(City/State and Zip Code)	_
WILMINGTON, DE 19808	
(Address)	
251 LITTLE FALLS DRIVE	_
(Name of Firm/Company)	
CORPORATION SERVICE COMPANY	_
(Name of Person)	
RESIGNATION DEPARTMENT	_
Please return all correspondence concerning this matter to	the following:
The enclosed Resignation of Registered Agent for a Corpo	
DOCUMENT NUMBER: F13000001256	
(Name of Corpora	ation)
Amazigh, Inc. SUBJECT:	
Division of Corporations	
TO: Amendment Section	

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

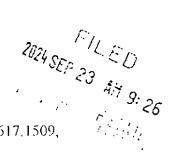
Amendment Section Division of Corporations P.O. Box 6327

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	ons 607.0503(2), 617.0502(2), 607.1509, or 617.1509,	
Florida Statutes, the undersigned,	CORPORATION SERVICE COMPANY	
	(Name of Registered Agent)	
hereby resigns as Registered Ager	Amazigh, Inc.	
nerody resigns as registered rigor	(Name of Corporation)	
F13000001256		
(Document Number, if known)		
A copy of this resignation was ma	ailed to the above listed corporation at its last known address.	
The agency is terminated and the this statement is filed.	office discontinued on the 31st day after the date on which	
Kyl Garl	/	
	(Signature of Resigning Agent)	
If signing on behalf of an entity:		
BY KYLE TODD		
	(Typed or Printed Name)	
VICE PRESIDENT	Γ	
	(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