Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H170002405113)))



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To:

Division of Corporations

Fax Number | : (850)617-6380

From:

Account Name

: REGISTERED AGENT SOLUTIONS INC

Account Number : 12010000062 Phone

: (888)705-7274

Fax Number

: (888)706-7274

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

REGISTERED AGENT RESIGNATION DIRECTBUY, INC.

Certificate of Status .	0
Certified Copy	0
Page Count	01
Estimated Charge	\$87.50

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Corporate Filing Menu

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COVER LETTER

TO: Amendment Section Division of Corporations

(Name of Corporation)

DOCUMENT NUMBER: F13000003760

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:

MARGOT MULLIN

Registered Agent Solutions, Inc.

1701 Directors Blvdl, Suite 300

Austin, TX 78744

(City/State and Zip Code)

For further information concerning this matter, please call:

MARGOT MULLIN

(Name of Person)

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

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RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sect	tions 607.0502(2), 617.0502(2), 607.1509, or 613	7.1509.	,	
	5			
<u> </u>	(Name of Registered Agent)			_
horaly resigns as Registered Age	ent for DIRECTBUY, INC. (Name of Corporation)			
incredy resigns as registered rige	(Name of Corporation)			_
F13000003760				
(Document Number, if known))			
A copy of this resignation was m	ailed to the above listed corporation at its last kn	own ac	idress	i.
The agency is terminated and the this statement is filed.	e office discontinued on the 31st day after the date	on W	hich	
If signing on behalf of an entity Justine Ka	(Signature of Posigning Agent)	SEC	17:	
Assistant S e	(Typed or Printed Name) Cretary, Registered Agent Solutions, Inc. (Capacity)	AHASSEE FLOR	SEP -7 PH 12: 42	
Fee f e	or filing this document:	AT C	42	Strack.
	0 - Active Corporation			
\$35.0	0 - Administratively dissolved/voluntarily dissobwithdrawn corporation	ved/		
Make checks	payable to Florida Department of State and mail to: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			