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Special Instructions to F	Filing Officer:	
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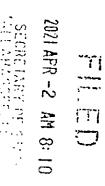


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COVER LETTER

Division of Corporations		
SUBJECT: WWELS, IN	C.	
	(Name of Corpo	ration)
DOCUMENT NUMBER: F140	00004410	_
The enclosed Resignation of Regist	tered Agent for a Corp	poration and fee are submitted for filing.
Please return all correspondence co	ncerning this matter t	o the following:
Kristie Tolliver		
(Name of Pers	son)	
COGENCY GLOBAL INC.		
(Name of Firm/Co	ompany)	
850 New Burton Rd., Suite 20	1	
(Address)	-	
Dover, DE 19904		
(City/State and Zi	p Code)	
For further information concerning	this matter, please ca	11:
Invoices Team	at (866) 621-3524 ode & Daytime Telephone Number)
(Name of Person)	(Area C	ode & Daytime Telephone Number)
Enclosed is a check made payable to \$35.00 for an administratively d	to the Florida Departn issolved, voluntarily c	nent of State for \$87.50 for an active corporation dissolved or withdrawn corporation.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 Corpora Post Office Box 63 Tallahassee, FL 323	ations 27

TO: Amendment Section

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the p	provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617	7.1509.	
Florida Statutes	the undersigned. COGENCY GLOBAL INC.		
	(Name of Registered Agent)		
horoby rocione a	s Registered Agent for WWELS, INC. (Name of Corporation)		
nereoy resigns a	(Name of Corporation)		
F1400000	4410		
(Documen	t Number, if known)		
A copy of this re	esignation was mailed to the above listed corporation at its last kno	own address.	
The agency is te this statement is	rminated and the office discontinued on the 31st day after the date filed.	on which	
	(Signature of Resigning Agent)		
If signing on bel	half of an entity:		
	Kristie Tolliver	2021 SEC TALL	
	(Typed or Printed Name)	2021 APR -2 SECRETARI MULAHASSI	
	Assistant Secretary, COGENCY GLOBAL INC. (Capacity)	-2 AM 8:10	

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