F15000001250

| (Requestor's Name) |
|---|
| · |
| (Address) |
| |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| : |
| (Business Entity Name) |
| t |
| (Document Number) |
| - |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer |
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| Office Use Only |
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To: Department Of State, Division Of Corporations

From: Amanda Miller

Ext:

Date: 03/14/24

Order #: 1445090-32

Re: ZYGA Technology, Inc. Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Agent Resignation

12000000195

Cost Limit: 87.50

AUTH

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

| TO: Amendment Section Division of Corporations | |
|---|---|
| SUBJECT: ZYGA Technology, Inc. | |
| (Name | e of Corporation) |
| DOCUMENT NUMBER: F15000001250 | |
| The enclosed Resignation of Registered Agent f | for a Corporation and fee are submitted for filing. |
| Please return all correspondence concerning this | s 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, j | please call: |
| RESIGNATION DEPARTMENT at | 800 927-9801 |
| (Name of Person) | (Area Code & 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

| rursuant to the provisions of secti | ons 607.0303(2), 617.0302(2), 607.1309, 6 | 1 017.1303 | 9, | |
|--|---|-------------|-------------|--------|
| Florida Statutes, the undersigned, | CORPORATION SERVICE COMPANY | | | |
| | (Name of Registered Agent) | | | • |
| hereby resigns as Registered Agen | ZYGA Technology, Inc. | | | |
| nereby resigns as registered Agen | (Name of Corporation) | | | _ |
| F15000001250 | | | | |
| (Document Number, if known) | | | | |
| A copy of this resignation was ma | iled to the above listed corporation at its las | st known a | ıddress | |
| The agency is terminated and the of this statement is filed. | office discontinued on the 31st day after the | e date on v | vhich | |
| | 4ii | | | |
| | (Signature of Resigning Agent) | _ | ~3 | |
| If signing on behalf of an entity: | | ÄLLAHÄS | 2024 MAR 15 | . و سد |
| BY AMANDA MII | LLER | ASSE | 15 | Ī |
| VICE PRESIDENT | (Typed or Printed Name) | ELFLORII | AM 10: 5 | |

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

(Capacity)