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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : INCORP SERVICES INC

Account Number : I20120000007 Phone : (702)866-2500

Fax Number : (702)866-2689

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

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REGISTERED AGENT RESIGNATION PRIVE HOLDING, INC.

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OCT 04 2018

S. YOUNG

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: PRIVE HOLDING, INC.
(Name of Corporation) DOCUMENT NUMBER: F15000001712
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:
Wendy Hefley
(Name of Person)
Incorp Services, Inc.
(Name of Firm/Company)
3773 Howard Hughes Parkway, Suite 500S
(Address)
Las Vegas, NV 89169-6014
(City/State and Zip Code)
For further information concerning this matter, please call:
Wendy Hefley for Incorp Services, Inc. (Name of Person) at (702) 866-2500 ext. 6904 (Area Code & Daytime Telephone Number)
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.
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

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

		(2), 617.0502(2), 607.1509, or 617	'.1509,
Florida Statutes, the unde	rsigned. Incorp Serv	rices, Inc.	
2 1011411 0 1111111111111111111111111111	···· g ·····	(Name of Registered Agent)	
hereby resigns as Registered Agent forPRIVE HOLDING, INC.			
increasy resigns as Acquisitered Agent for		(Name of Corporation)	
F15000001712			
(Document Number, i	f known)		•
A copy of this resignation	was mailed to the abo	ove listed corporation at its last know	own address.
The agency is terminated this statement is filed.	and the office disconti	inued on the 31st day after the date	on which
	Versely	,	
	(Signature of	Resigning Agent)	
If signing on behalf of an	entity:		<u>≯</u> ∺∷ ®
a digitally on contain or an	CARLLY.)	. A
	Wendy Hefley		
	(Typed or	Printed Name)	· Mi w im
			⊒ાં ≩ે 🗇
	Authorized Representat	ive on behalf of Incorp Services, Inc.	<u>8</u> .
-	(Ca	apacity) .	27 DA

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