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(((H24000056141 3)))



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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)900-2290

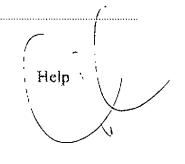
\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: documents@incorp.com

## REGISTERED AGENT RESIGNATION ENCORE DERMATOLOGY INC.

Certificate of Status	0
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Page Count	03
Estimated Charge	\$35.00

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## **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: ENCORE DERMATOLOGY INC. (Name of Corporation)		
DOCUMENT NUMBER: F15000004868		
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)	2024 FEB -9	-
Incorp Services, Inc.  (Name of Firm/Company)	0 784G	
3773 Howard Hughes Parkway, Suite 500S (Address)	MID: 45	
Las Vegas, NV 89169-6014 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Wendy Hefley for Incorp Services, Inc. at (702 ) 866-2500 ext 6904 (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or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

Pursuant to the provisions of section	ons 607.0503(2), 617.0502(2), 607.1509, or 617.1509	).
Florida Statutes, the undersigned.	Incorp Services, Inc.	
~	(Name of Registered Agent)	
hereby resigns as Registered Agen	t for <u>ENCORE DERMATOLOGY INC.</u> (Name of Corporation)	······
F15000004868		
(Document Number, if known)		
	iled to the above listed corporation at its last known a	
The agency is terminated and the c this statement is filed.	InCorp Services, Inc.	WEB-9
If signing on behalf of an entity:	(Signature of Rescarsing) (1984)	AMIO: 45
Wendy Hofley		
	(Typed or Frinted Name)	

## 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

Authorized Representative on behalf of Incorp Services, Inc. (Capacity)