12/8/2020

Division of Corporations

Florida Department of State

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.

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : INCORP SERVICES INC

Account Number : I20120000007 : (702)866-2500

Fax Number : (702)866-2689

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

Email Address: processing@incorp.com

REGISTERED AGENT RESIGNATION PARTY PATCH INC.

Certificate of Status	0
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Page Count	03
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: PARTY PATCH INC.
(Name of Corporation)
DOCUMENT NUMBER: F15000004934
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. 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of State for \$87.50 for an active corporatio or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 sect	tions 607.0503(2), 617.0502(2), 607.1509, or 617.15	509,	
Florida Statutes, the undersigned	Incorp Services, Inc.		
t fortua omitioo, tife andereighee	(Name of Registered Agent)		
hereby resigns as Registered Age	ent for PARTY PATCH INC. (Name of Corporation)		
F15000004934			
(Document Number, if known)	•		
A copy of this resignation was m	ailed to the above listed corporation at its last know	/n address.	
The agency is terminated and the this statement is filed. ———————————————————————————————————	office discontinued on the 31st day after the date of InCorp Services, Inc. (Signature of Resigning Agent)	on which 2020 DEC -	
<u>Wendy Hefle</u>	v (Typed or Printed Name)	-8 AM 9: 56	

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)