

FI6 000001594

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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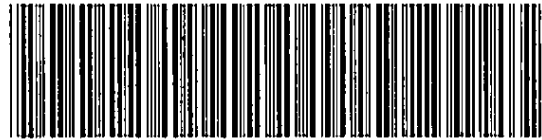
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

5/1/21

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: VegalAB Inc.
(Name of Corporation)

DOCUMENT NUMBER: 716000001594

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael J. Ryan
(Name of Person)

90 Ryan Law Group PLLC
(Name of Firm/Company)

636 U.S. Hwy 1, Ste 110
(Address)

No Palm Beach FL 33408
(City/State and Zip Code)

For further information concerning this matter, please call:

Michael J Ryan at (561) 8814447
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Michael J. Ryan, hereby resign as Registered Agent
(Title)

of Vegulab, Inc.,
(Name of Corporation)

F16000001594, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

[Signature]
(Signature of resigning officer/director)

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SECRETARY OF STATE
TALLAHASSEE, FL

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314