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 : INCORF SERVICES INC

Account Number : 120320000007 : (70%)866-2500 \approx

Fax Number : (702)866 2689

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

wendy.hefley@incorp.com Email Address:

REGISTERED AGENT RESIGNATION AUTOGRAPHY II, INC.

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COVER LETTER

Division of Corporations
SUBJECT: AUTOGRAPHY II, INC. (Name of Corporation)
DOCUMENT NUMBER: F17000005604
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 (Area Code & Daytime Telephone Number)
Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporate
or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassec, 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 sections 607.0503(2), 617.0502(2), 607.1509, or 617.1509,	
Florida Statutes, the undersigned, Incorp Services, Inc.	
(Name of Registered Agent) AUTOGRAPHY II, INC.	
hereby resigns as Registered Agent for	
F17000005604	
(Document Number, if known)	
Λ copy of this resignation was mailed to the above listed corporation at its last known address.	
The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed. InCorp Services, Inc.	
(Signature of Rewigeling Xugera)	
If signing on behalf of an entity:	
Wendy Hefley (Typed or Printed 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 Incom Services, Inc. (Capacity)