F1800000 1241

(Re	questor's Name)	
(Ad	dress)	<u>.</u>
(Àd	dress)	
(Cit	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
		!
Inactive	<u>, </u>	





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RA Resignation

JAN 1 0 2020 D CUSHING

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: LEXX COMM NETWORKS INC.	
(Name of Corporation) DOCUMENT NUMBER: F18000001241	-
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for	- r filing.
Please return all correspondence concerning this matter to the following:	
Kent Rockwell	
(Name of Person)	
Universal Registered Agents, Inc.	
(Name of Firm/Company)	
PO Box 23788	
(Address)	ig
Overland Park, KS 66283	
(City/State and Zip Code)	
For further information concerning this matter, please call:	ယ္ 📜
Kent Rockwell 855 236-9172	ນ ເ ໝ
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617	7 1500
ruisuant to the provisions of sections 607.0502(2), 017.0502(2), 007.1509, 01017	7.1309,
Florida Statutes, the undersigned, UNIVERSAL REGISTERED AGENT	S, INC.
(Name of Registered Agent)	
hereby resigns as Registered Agent for LEXX COMM NETWORK	S INC.
(Name of Corporation)	
F18000001241	
(Document Number, if known)	
A copy of this resignation was mailed to the above listed corporation at its last known	own address.
The agency is terminated and the office discontinued on the 31st day after the date	on which
this statement is filed.	
$/\lambda //$	
(Signature of Resigning Agent)	,
If signing on behalf of an entity:	
	छं े
Kent Rockwell	_ = ₹
(Typed or Printed Name)	19 HOV 27
	-
CFO	3 2
(Capacity)	· 2
(= -t ₁ =)	

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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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