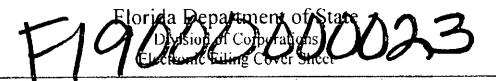
4/5/2021

Division of Corporations



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.

(((H21000134758 3)))



H210001347583ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number: FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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

Email Address:__

REGISTERED AGENT RESIGNATION NATIONAL SMALL BUSINESS SOLUTIONS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$87.50

Electronic Filing Menu

Corporate Filing Menu

O SIMMONS Help APR 0 6 2021

Page: 3 of 3

2021 APR -5 PM 2:58

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

	502(2), 617.0502(2), 607.1509, or 617.1509,	
Florida Statutes, the undersigned, NRAI SERVICES, INC.		
	(Name of Registered Acart)	
hereby resigns as Registered Agent for NAT	TIONAL SMALL BUSINESS SOLUTIONS, INC.	
	(Name of Corporation)	
F1900000023		
(Document Number, if known)		
A copy of this resignation was mailed to the	above listed corporation at its last known address.	
The agency is terminated and the office disc this statement is filed.	ontinued on the 31st day after the date on which	
Kniba	Stanfung	
(Signatu	re of Resigning Agart)	
If signing on behalf of an entity:		
Kimberly Laughrey		
(Type	d or Printed Name)	
ASSISTANT SECRETARY		
	(Caraity)	

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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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