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:		
(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
L(City	/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
1	iness Entity Name)	
<b>!</b> <b>h</b>		
(Doc	ument Number)	
Certified Copies	Certificates of Status	
Special Instructions to Filing Officer		
Office Use Only		
•		



CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195				
REFERENCE : 358318. 28323810				
AUTHORIZATION :				
COST LIMIT : \$-85.50 35.00				
ORDER DATE : March 8, 2024				
ORDER TIME : 3:56 PM				
ORDER NO. : 358318-275				
CUSTOMER NO: 8323810				
RA Resignation ANNUAL REPORT FILLING				
NAME: UCLOUDLINK (AMERICA) LTD.				
ANNUAL REPORT				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY  XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING				
CONTACT PERSON: Unassigned-EXT#				

EXAMINER'S INITIALS:

### **COVER LETTER**

TO:	Amendment Section Division of Corporations		
SUBJ	Ucloudlink (America) Ltd. JECT:		
	(Name of	of Corporation)	
DOC	UMENT NUMBER: F20000005625		
The e	enclosed Resignation of Registered Agent for a	a Corporation and fee are submitted for	filing.
Pleas	e return all correspondence concerning this ma	natter to the following: .	
RESIG	GNATION DEPARTMENT		
	(Name of Person)		
CORP	PORATION SERVICE COMPANY		
	(Name of Firm/Company)		
251 LI	ITTLE FALLS DRIVE		
_	(Address)	<del></del>	
WILM	INGTON, DE 19808		
	(City/State and Zip Code)	<del></del>	
For fu	urther information concerning this matter, pleas	ease call:	
RESIC	GNATION DEPARTMENT 800 at (	)	
	(Name of Person) (A	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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

#### 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 sections $607.0503(2)$ , $617.0502(2)$ , $60$	
Florida Statutes, the undersigned, CORPORATION SERVICE COMPA	NY
(Name of Registor	ered Agent)
hereby resigns as Registered Agent for Ucloudlink (America) Ltd.	
(Name of Corp	poration)
F20000005625	
(Document Number, if known)	
A copy of this resignation was mailed to the above listed corporation	on at its last known address.
The agency is terminated and the office discontinued on the 31st dathis statement is filed.	y after the date on which
Shauna Godbolt (Signature of Resigning Agent)	
If signing on behalf of an entity:	
BY SHAUNA GODBOLT	
(Typed or Printed Name)	2024 TALL
VICE PRESIDENT	2024 HAR 18
(Capacity)	SEE, SEE,
	POZ4 MAR 18 AM 8: 54
Fee for filing this document:	<b>74</b>
\$87.50 - Active Corporation	

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

withdrawn corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/