Division of Corporations Electronic Filing Cover Sheet

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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 : (614)573-3996

\*\*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 POINTCHAIN TECHNOLOGY USA CA INC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

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## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 60	7.0502(2), 617.0502(2), 607.1509, or	
617.1509, Florida Statutes, the undersign	ned, C T CORPORATION SYSTEM	
	(Name of Registered Agent)	
hereby resigns as Registered Agent for _	POINTCHAIN TECHNOLOGY USA CA INC.	
mereby resigns as registered Agent for _	(Name of Corporation)	<del></del> _
F21000002293		
(Document Number, if known)	_	
The agency is terminated and the office of this statement is filed.	the above listed corporation at its last knows the discontinued on the 31st day after the date new Welm - Brown	
	nature of Resigning Agent)	2024
If signing on behalf of an entity:		2024 JUL -
Nancy	Helm Brown	ं ध <b>्र</b>
(7)	'yped or Printed Name)	# 9.
Assist	nnt Secretary	): 28
	(Capacity)	

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\$87.50 - Active Corporation\$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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