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## **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: VS Media Gr		
DOCUMENT NUMBER: F9900	(Name of Corporati 0002059	ion)
		ation and fee are submitted for filing.
Please return all correspondence cor	-	_
Mary Perry	-	· ·
(Name of Person	on)	•
7616 Southland Blv	rd.	
(Name of Firm/Co	mpany)	-
Suite 104		
(Address)		-
Orlando, FL		
(City/State and Zip	Code)	-
For further information concerning t	this matter, please call:	
John J. Murphy	860	721-6269
(Name of Person)	(Area Code	& Daytime Telephone Number)
Enclosed is a check made payable to or \$35.00 for an administratively dis	the Florida Departmen ssolved, voluntarily diss	t of State for \$87.50 for an active corporation olved or withdrawn corporation.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 Corporatio Post Office Box 6327 Tallahassee, FL 32314	

CR2E046 (04/12)

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.	1509,	
Florida Statutes, the undersigned, Mary Perry		
(Name of Registered Agent)		
hereby resigns as Registered Agent for VS Media Group, Inc.		
(Name of Corporation)	·	
F9900002059		
(Document Number, if known)		
A copy of this resignation was mailed to the above listed corporation at its last know	vn address.	
The agency is terminated and the office discontinued on the 31st day after the date of this statement is filed.  **Augustian Statement of Resigning Agent**	on which	
If signing on behalf of an entity:  MARY PERRY  (Typed or Printed Name)	2018 OCT 15 AN SECRETARY OF TALLAHASSE	n
Vice President (Capacity)	AM 4: 21 OF STATE SEE, FL	0

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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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