## F99000005820

Requester's Name 01 MAR 26 PM 12: 12 Address SECRETARY OF STATE TALLAHASSEE FLORIDA City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) \_ (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Certified Copy ■ Walk in ☐ Pick up time Photocopy Certificate of Status Mail out **₩** Will wait **NEW FILINGS AMENDMENTS** ☐ Profit Amendment Resignation of R.A., Officer/Director ■ Not for Profit Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Merger Other REGISTRATION/QUALIFICATION OTHER FILINGS Annual Report Foreign Fictitious Name Limited Partnership Reinstatement Trademark Other

Examiner's Initials

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## RESIGNATION OF REGISTERED AGENT

01 MAR 26 PM 12: 12

SECRETARY OF STATE TALLAHASSEE, FLORIDA

| Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,   |
|---|
| Pursuant to the provisions of sections  |
| Florida Statutes, the undersigned, C T CORPORATION SYSTEM (Name of registered agent)  |
| hereby resigns as Registered Agent for SMASH ENTERTAINMENT GROUP, INC. (N.Y. DOM.)  (Name of corporation)   |
| A copy of this resignation was mailed to the above listed corporation at its last known address.  575 Madison Avenue Suite 1006 New York, NY 10022  Attn: Andrea Hughes President The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed. |
| For Olf   |
| (Signature of resigning agent)  |
| If signing on behalf of an entity:  |
| C T CORPORATION SYSTEM  (Typed or Printed Name)   |
| ASSISTANT SECRETARY   |
| (Capacity)  |

Fee for filing this document:

\$87.50 - Active corporation

\$35.00 - Administratively dissolved corporation

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