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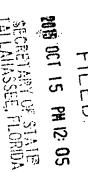
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COVER LETTER

HIGHTEN MANAGEMENT LLC Name of Limited Liability Company DOCUMENT NUMBER: L14000170421 The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Michael LaSala Name of Person IncSmart.biz, Inc Name of Firm/Company 4264 Lady Burton St Address Las Vegas, NV 89129 City/State and Zip Code michael@incsmart.biz E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Michael Name of Person

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO:

Registration Section Division of Corporations

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the prov	risions of section 605.0115, Florida Statutes, the unde	rsigned,	
INCSMART FLO	ORIDA, INC.	, hereby resigns as	
	Name of Registered Agent	,,	
Registered Agent fo	THIGHTEN MANAGEMENT LLC		
	Name of Limited Liability Company		
L14000170421			
Docume	ent Number, if known		
A copy of this resig	nation was mailed to the above listed limited liability	company at its last known address.	
The agency is termi	nated and the office discontinued on the 31st day after Signature of Resigning Agent	r the date on which this statement is fil	led.
If signing on behalf	of an entity:		
	David Oliver	1938. 1938.	55 E
	Typed or Printed Name		翌 〇
	President INCSMART FLORIDA INC.		₽ N

FILING FEES:

Capacity

\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

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