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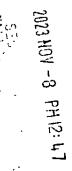
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COVER LETTER

PHNX Collective LLC Name of Limited Liability Company DOCUMENT NUMBER: L21000037714 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: United States Corporation Agents, Inc. Name of Person Legalzoom.com, Inc. Name of Firm/Company 9900 Spectrum Dr. Address Austin, TX 78717 City/State and Zip Code raresignations@legalzoom.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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:

Name of Person

TO: Registration Section

Division of Corporations

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

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	is of section 605.0115, Florida Statutes, the unders	igned,	
United States Corporation Agents, Inc.		hereby resigns as	
***	Name of Registered Agent		
Registered Agent for Pl	HNX Collective LLC		
	Name of Limited Liability Company		
L21000037714			
Document Nu	mber, if known		
A copy of this resignation	on was mailed to the above listed limited liability co	ompany at its last known address.	
The agency is terminated	d and the office discontinued on the 31st day after t		
	Signature of Resigning Agent	2023 NOV - SEC: (1) TATE (2)	المنتحدث
If signing on behalf of an entity:		ယ	
	Cheyenne Moseley	·	M M
	Typed or Printed Name		والمنتصرة
	Asst. Secretary for United States Corporation Ager	nts, Inc.	
	Capacity		

FILING FEES:
\$ 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\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company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