## M15000001682

(Re	equestor's Name)			
(Ad	ddress)			
(Ad	ddress)	<u>-</u>		
(Ci	ty/State/Zip/Phone #)			
PICK-UP	☐ WAIT ☐ MAI	L		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of Status	<del>_</del>		
Special Instructions to Filing Officer:				
		1		
<u>.</u>				





400440551564

2025 FEB -5 PM 3: 45

2025 FEB -5 AM 8: 58

FILED



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088
If there are any issues
please contact Cheyanne at
850-202-1882

Date:	02/10/2025	
Name:	Cheyanne Davis	_
Reference #	t:	<del></del>
Entity Name	:CG	S HOLDCO
☐ Articl	es of Incorporation/Authorizatio	n to Transact Business
✓ Amer	ndment	
Chan	ge of Agent	
Reins	statement	
Conv	rersion	
☐ Merg	er	
Disso	olution/Withdrawal	
☐ Fictiti	ous Name	
✓ Othe	rRESIGNATIO	ON OF REGISTERED AGENT
Authorized A	Amount: \$25.00	
Signature:	(Vrume Paine	

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: CGS HOLDCO, LLC Name of L	imited Liability Company
DOCUMENT NUMBER: M1500000168	32
The enclosed Resignation of Registered Agen for filing.	nt for a Limited Liability Company and fee are submitted
Please return all correspondence concerning t	his matter to the following:
Kelly Casey	
Name of Person	
COGENCY GLOBAL INC. fka Nation Name of Firm/Company	al Corporate Research, Ltd.
850 New Burton Rd., Suite 201	
Address	<del></del>
Dover, DE 19904  City/State and Zip Code	
E-mail address: (to be used for future annual repo	ort notification)
For further information concerning this matte	r, please call:
SOP Team  Name of Person	at ( <u>866</u> ) 621-3524 Area Code Daytime Telephone Number
Enclosed is a check made payable to the Flori liability company or \$25.00 for an administrational liability company.	ida Department of State for \$85.00 for an active limited tively dissolved, voluntarily dissolved or withdrawn limited
MAILING ADDRESS:	STREET ADDRESS:
Registration Section	Registration Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle
	Tallahassee FL 32301

INHS17 (2/14)



February 6, 2025

COGENCYGLOBAL

SUBJECT: CGS HOLDCO, LLC Ref. Number: M15000001682

We have received your document for CGS HOLDCO, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

List the name of the current Registerd Agent.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan Regulatory Specialist III

Letter Number: 925A00002510

Please keep original file date



## STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersig	ned,
	ereby resigns as
Name of Registered Agent	
Registered Agent forCGS HOLDCO, LLC	
Name of Limited Liability Company	•
M15000001682	
Document Number, if known	
A copy of this resignation was mailed to the above listed limited liability con  The agency is terminated and the office discontinued on the 31st day after the  Signature of Resigning Agent	e date on which this statement is filed.
If signing on behalf of an entity:	2025 FEB
Kelly Casey	BB
Typed or Printed Name Assistant Secretary, COGENCY GLOBA	AL INC.
Capacity	2025 FEB -5 AH 8: 59 INLLAHASSEE, FLORIDA  ALINC.
\$ 85.00 Active limited liability comp \$ 25.00 Administratively dissolved/ withdrawn limited liability of	voluntarily dissolved/

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