N2000005988

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bı	usiness Entity Nan	ne)
(Dc	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		





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COVER LETTER

Division of Corporations			
Subject: Soflo Deejays Inc			
30B/EC1	(Name of Corpo	oration)	
DOCUMENT NUMBER: N20000005988	···-		
The enclosed Resignation of Registered	d Agent for a Corp	poration and fee are submi	tted for filing
Please return all correspondence concer	ming this matter (o the following:	
Brandon Siegler			
(Name of Person)			
Soflo Decjays Inc			
(Name of Firm/Compa	my)		
710 SE Atlantic Dr			
(Address)			
Lantana, FL. 33462			
(City/State and Zip Co	ode)	_	
For further information concerning this	matter, please ca	11:	
Brandon Siegler	561	202-4604	
(Name of Person)	(Arca C) ode & Daytime Telephone N	lumber)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:

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

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of section	ons 607.0503(2), 617.0502(2), 607.1509, or 61	7.1509	9.	
Florida Statutes, the undersigned,	RAJESH PARGAN			
torida statates, the anaetsigned;	(Name of Registered Agent)			
hereby resigns as Registered Agen	Soflo Deejays Inc			
neredy resigns as Registered Agen	(Name of Corporation)			
N20000005988				
(Document Number, if known)				
A copy of this resignation was ma	iled to the above listed corporation at its last k	nown a	addres	ss.
The agency is terminated and the other this statement is filed. Law If signing on behalf of an entity:	(Signature of Resigning Agent)	te on v	vhich	
Rajesh Pargan				
	(Typed or Printed Name)	_		
\$87.50	(Capacity) r filing this document: - Active Corporation - Administratively dissolved/voluntarily disso	SECRETARY OF STAT	2020 JUL 24 AMII: 48	

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