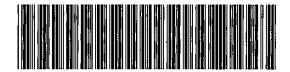
## P02000090870

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

125°04

## **COVER LETTER**

TO: Amendment Section Division of Corporations			
SUBJECT: VNOC Space, Inc.			
	(Name of Corporation	n)	
DOCUMENT NUMBER: P020000	)90870		
The enclosed Resignation of Registered	d Agent for a Corporat	ion and fee are submitted for	filing.
Please return all correspondence conce	erning this matter to the	following:	
Martin Essenburg			
(Name of Person)	1		
VNOC Space Inc.			
(Name of Firm/Comp	any)		
18459 Pines Blvd., #255			
(Address)			
Pembroke Pines, FL 33029			
(City/State and Zip Co	ode)		
For further information concerning this	s matter, please call:		
Martin Essenburg	at ( 954 )	243-3420 & Daytime Telephone Number)	
(Name of Person)	(Area Code à	& Daytime Telephone Number)	
Enclosed is a check made payable to the or \$35.00 for an administratively disso	he Florida Department Dived, voluntarily disso	of State for \$87.50 for an acti lved or withdrawn corporation	ve corporation n.
Amendment Section A Division of Corporations Clifton Building	Mailing Address: Amendment Section Division of Corporation Post Office Box 6327 Fallahassee, FL 32314	s	

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 6	507.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, Ro	Obert Glenn Young (Name of Registered Agent)
hereby resigns as Registered Agent for	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
P02000090870	
(Document Number, if known)	
A copy of this resignation was mailed	to the above listed corporation at its last known address.
The agency is terminated and the office this statement is filed.  If signing on behalf of an entity:	e discontinued on the 31st day after the date on which  SECRETARY OF STATE  Ignature of Resigning Agent)  TORIO
, ,,,,, <u>,</u> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(Typed or Printed Name)
	(Capacity)

## Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

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