

PO5000122197

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

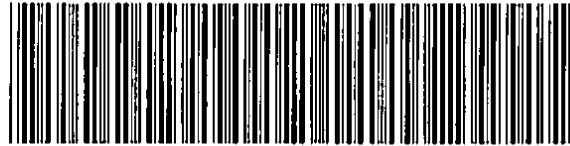
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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NEXOGY, INC.

DOCUMENT NUMBER: P05000122197

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

CARLOS F. LAHRSEN
LD TELECOM, INC.
2121 PONDE DE LEON BLVD, SUITE 610
CORAL GABLES, FLORIDA 33134

For further information concerning this matter, please call:

CARLOS F. LAHRSEN at (786)301-5295

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:

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

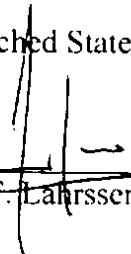
Street Address:

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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, CARLOS F. LAHRSEN, hereby resign as PRESIDENT and DIRECTOR of NEXOGY, INC., P05000122197, a corporation organized under the laws of the State of FLORIDA.

See attached Statement of Fact concerning the resignation set forth above.



Carlos F. Lahrssen

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

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

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TALLAHASSEE, FLORIDA

STATEMENT OF FACT

SUBJECT: NEXOLOGY, INC.

DOCUMENT NUMBER: P05000122197

Since November 17, 2020, I, CARLOS F. LAHRSEN, have not been an officer or director of Nexogy, Inc. After such date, any annual report of Nexogy, Inc. stating otherwise is erroneous.



Carlos F. Lahrssen

STATE OF FLORIDA
COUNTY OF MIAMI-DADE

The foregoing instrument was acknowledged before me this 14th day of November 2023 by Carlos F. Lahrssen.

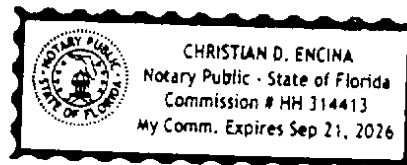


(Signature of Notary Public, State of Florida)

Christian Encina

(Printed Name of Notary)

(NOTARY SEAL)



Personally Known

or

Produced Identification

Type of Identification Produced: Florida State Drivers License

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SECTION 1
TALLAHASSEE, FL

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