P07000134166

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #	<i>f</i>)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	cument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	

Office Use Only

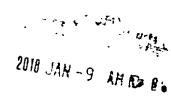


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COVER LETTER

TO:	Amendment Section
	Division of Corporations

ONT PAYROLL SERVICES, INC. (Name of Corporation) DOCUMENT NUMBER: P07000134166 The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Jourdan Cerrillo (Name of Person) DoMyLLC.com, LLC (Name of Firm/Company) 5716 Corsa Ave., Suite # 110 (Address) Westlake Village, CA 91362 (City/State and Zip Code) For further information concerning this matter, please call: at $(\frac{818}{\text{(Area Code & Daytime Telephone Number)}})$ Jourdan Cerrillo (Name of Person)

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

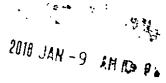
Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:

Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION



Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, InCorp Services, Inc. (Name of Registered Agent)
hereby resigns as Registered Agent for Dnt Payroll Services, Inc. (Name of Corporation)
(Name of Confederation)
P07000134166
(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 discontinued on the 31st day after the date on which this statement is filed. (Signature of Resigning Agent)
If signing on behalf of an entity:
Steven Pickett
(Typed or Printed Name)
Assistant Secretary, on behalf of InCorp Services, Inc.
(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