

P12.000058949

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

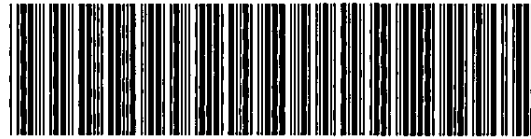
Certified Copies _____

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16 JUL -5 AM 10:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Ra Resignation

JUL 08 2016

D CUSHING



**REGISTERED AGENT
SOLUTIONS INC**

Corporate Office
1701 Directors Blvd.
Suite 300
Austin, TX 78744

(888) 705-7274 *Phone*
(888) 706-7274 *Fax*
www.rasi.com *Web*

June 28, 2016

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

RE: Entity Resignations

To Whom It May Concern:

Registered Agent Solutions, Inc. hereby resigns as registered agent for the attached entities. Written notice of resignation was given to the attached entities by delivering such notice to the entities at their last known addresses. Enclosed please find the following for filing with the Florida Secretary of State:

- One original and one copy of the Resignation of Registered Agent statement.
- \$35.00 Filing fee for Inactive company

Please file immediately the enclosed, and return a file-stamped copy of each resignation to the undersigned. If you have any questions regarding this filing, feel free to contact the undersigned directly at (512) 480-9131.

Sincerely,

Phillip Karnell
Client Services Representative
Registered Agent Solutions, Inc.

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SIG CAPITAL, INC.

(Name of Corporation)

DOCUMENT NUMBER: P12000058949

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:

PHILLIP KARNELL

(Name of Person)

REGISTERED AGENT SOLUTIONS, INC

(Name of Firm/Company)

1701 DIRECTORS BLVD, STE 300

(Address)

AUSTIN, TX 78744

(City/State and Zip Code)

For further information concerning this matter, please call:

PHILLIP KARNELL

(Name of Person)

at **(888) 705-7274**

(Area Code & Daytime Telephone Number)

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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, **REGISTERED AGENT SOLUTIONS, INC**

(Name of Registered Agent)

hereby resigns as Registered Agent for **SIG CAPITAL, INC**

(Name of Corporation)

P12000058949

(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:

JACLYN WRIGHT

(Typed or Printed Name)

ASSISTANT SECRETARY

(Capacity)

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SECRETARY OF STATE
TALLAHASSEE, FL 32314

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**