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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : INCORP SERVICES INC

Account Number : 120120000007 : (702)866-2500 : (702)900-2290 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

documents@incorp.com Email Address:

REGISTERED AGENT RESIGNATION CREIGHTON HILL SPORTS & ENTERTAINMENT CORP

Certificate of Status	0
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Page Count	03
Estimated Charge	\$87.50

COVER LETTER

•	
TO:	Amendment Section Division of Corporations
SUBJ	ECT: CREIGHTON HILL SPORTS & ENTERTAINMENT CORP (Name of Corporation)
DOC	JMENT NUMBER: P18000019393
The e	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
Wend	y Hefley (Name of Person)
Ілсоп	O Services, Inc. (Name of Firm/Company)
<u>3773 :</u>	Howard Hughes Parkway, Suite 500S (Address)
Las V	egas, NV 89169-6014 (City/State and Zip Code)
For fu	rther information concerning this matter, please call:
Wend	y Hefley for Incorp Services, Inc. at (702) 866-2500 ext 6904 (Name of Person) (Area Code & Daytime Telephone Number)
E-ala	red is a sheek made nameble to the Electide Demontract of State for \$97.50 for a series of

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

rursuant to the provisions of section	ons 607.0503(2), 617.0502(2), 607.1509, or 6	517.1509,		
orida Statutes, the undersigned, Incorp Services, Inc.				
	(Name of Registered Agent)			
hereby resigns as Registered Agen	t for <u>CREIGHTON HILL SPORTS & ENTI</u> (Name of Corporation)	<u>ERTAINMENT</u> CORP		
P18000019393				
(Document Number, if known)				
A copy of this resignation was ma	iled to the above listed corporation at its last	known address.		
The agency is terminated and the of this statement is filed.	office discontinued on the 31st day after the d	late on which		
	mail (2022 L.::2		
	(Signature of Resigning Agent)			
If signing on behalf of an entity:	. 9			
Wendy Hefley		5		
•	(Typed or Printed Name)			
<u>Authorized Rep</u> i	resentative on behalf of Incorp Services, Inc.			

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
Tallabassee, FL 32314

(Capacity)