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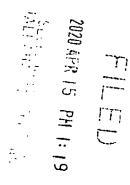
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COVER LETTER

TO: Amendment Section Division of Corporations SUBJECT: Health Smart Vending, Inc. (Name of Corporation) DOCUMENT NUMBER: P18000034474 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: United States Corporation Agents, Inc. (Name of Person) Legalzoom.com, Inc. (Name of Firm/Company) 101 North Brand Blvd. 11th Floor (Address) Glendale, CA 91203 (City/State and Zip Code) For further information concerning this matter, please call: Janna Pantoja (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 | 7.1509. | | |
|--|------------|----------|--|
| Florida Statutes, the undersigned. United States Corporation Agents, Inc. | ٥. | | |
| (Name of Registered Agent) | | | |
| hereby resigns as Registered Agent for Health Smart Vending, Inc. | | | |
| (Name of Corporation) | ··· - | | |
| P18000034474 | | | |
| (Document Number, if known) | | | |
| A copy of this resignation was mailed to the above listed corporation at its last kno | own ado | dress. | |
| The agency is terminated and the office discontinued on the 31st day after the date this statement is filed. | on wh | ich | |
| (Signature of Resigning Agent) | ī-:· | 20. | |
| If signing on behalf of an entity: | ਧੂਰ .≁* | 2020 APR | |
| Cheyenne Moseley | · | 5 | |
| (Typed or Printed Name) | | PM I | |
| Asst. Secretary for United States Corporation Agents, Inc. | | 1: 19 | |

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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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

(Capacity)