## P190000 19933

(Re	questor's Name)	•	
(Ad	dress)		
(Ad	dress)	<u> </u>	
, i	ŕ		
(Cit	y/State/Zip/Phone	e #)	
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(Do	cument Number)	1	
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## **COVER LETTER**

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

Pursuant to the provisions of section	ons 607.0503(2). 617.0502(2), 607.1509. or 617.1509.		
Florida Statutes, the undersigned,	InCorp Services, Inc.		
	(Name of Registered Agent)	•	
hereby resigns as Registered Agen	Media One Solutions Inc.		
weree, ree g.i.e as reeg.ine, etc. regen	(Name of Corporation)	-	
P19000019933			
(Document Number, if known)	<del></del>		
A copy of this resignation was mai	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 date on which		
Sar	(Signature of Resigning Agent)	2020 APR	
If signing on behalf of an entity:		<del>2</del>   5	277 - 277 -
Sarah Balen		AH 8	기열(C) 보다 대표
	(Typed or Printed Name)	9: OO	- <u></u> 4
Assistant Secretary	- 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Fee for filing this document: \$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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 Tallahassee, FL 32314

(Capacity)