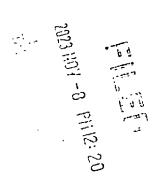
P19000046663

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Document Number)
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Pupformance Inc.
(Name of Corporation) DOCUMENT NUMBER: P19000046663
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)
9900 Spectrum Dr. (Address)
Austin, TX 78717 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (800)773-0888 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617			
Florida Statutes, the undersigned. United States Corporation Agents, Inc.	٥.		
(Name of Registered Agent)			
hereby resigns as Registered Agent for Pupformance Inc.			
(Name of Corporation)			
P19000046663			
(Document Number, if known)			
A copy of this resignation was mailed to the above listed corporation at its last known	own add	lress.	
The agency is terminated and the office discontinued on the 31st day after the date this statement is filed.	on whi	ch	
(Signature of Resigning Agent)	Film	20	
If signing on behalf of an entity:	- .	2023 HOV -	ال المارية المارية المارية
Cheyenne Moseley		යා	
(Typed or Printed Name)	•	:2H113	(<u> </u>
Asst. Secretary for United States Corporation Agents, Inc.		: 20	

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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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