## P20000003390

| (Red                                    | questor's Name)   |             |
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| (Cit                                    | y/State/Zip/Phon  | e #)        |
| PICK-UP                                 | ☐ WAIT            | MAIL        |
| (Bu                                     | siness Entity Nar | me)         |
| (Do                                     | cument Number)    |             |
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resignation B

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## **COVER LETTER**

| Division of Corporations   |  |
|--|--|
| SUBJECT: UCG ACQUISITION   | CORPORATION  |
| DOCUMENT NUMBER: P2000002390   | f Corporation)   |
| The enclosed Resignation of Registered Agent for   | a Corporation and fee are submitted for filing.  |
| Please return all correspondence concerning this m   | atter to the following:  |
| Kristie Tolliver   |  |
| (Name of Person)   | <del></del>  |
| COGENCY GLOBAL INC.  |  |
| (Name of Firm/Company)   | <del></del> .  |
| 850 New Burton Rd., Suite 201  |  |
| (Address)  |  |
| Dover, DE 19904  |  |
| (City/State and Zip Code)  | <del></del>  |
| For further information concerning this matter, ple  | ase call:  |
| Invoices Team at (8) at (8) (8)  | Nrea Code & Daytime Telephone Number)  |
| Enclosed is a check made payable to the Florida D or \$35.00 for an administratively dissolved, volunt   | epartment of State for \$87.50 for an active corporation arily dissolved or withdrawn corporation. |
| Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  Mailing Add Amendment S Division of C Post Office F Tallahassee, I | Section<br>orporations<br>fox 6327   |

TO: Amendment Section

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| FOR A CORPORATION   | SEASE THAT OF STATE. |
|---|----------------------|
| Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1; | 509, or 617,1509,    |

| Florida Statutes, the undersigned, COGENCY GLOBAL INC.  |         |
|---|---------|
| (Name of Registered Agent)  |         |
| hereby resigns as Registered Agent for UCG ACQUISITION CORPORAT   | TION    |
| (Name of Corporation)   |         |
| P2000002390   |         |
| (Document Number, if known)   |         |
| A copy of this resignation was mailed to the above listed corporation at its last known a                         | ddress. |
| The agency is terminated and the office discontinued on the 31st day after the date on within statement is filed. | hich    |
| (Signature of Resigning Agent)  |         |
| If signing on behalf of an entity:  |         |
| Kristie Tolliver  |         |
| (Typed or Printed Name)   |         |

Assistant Secretary, COGENCY GLOBAL INC.

(Capacity)

## 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