10/27/22, 4:33 PM

Division of Corporations



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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

<u>.</u> .

Account Name : INCORPORATING SERVICES, LTD.

Account Number : 120050000052 Phone : (850)656-7956

Fax Number : (850)656-7953

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

Email Address:

REGISTERED AGENT RESIGNATION VIBEZ SOFTWARE CORP.

Certificate of Status	0
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J. HORNE

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: VIBEZ SOFTWARE CORP.
(Name of Corporation)
DOCUMENT NUMBER: P20000055811
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:
Westley Look
(Name of Person)
Incorporating Services, Ltd. (Name of Firm/Company)
3500 S DuPont Hughway (Address)
Dover, DE 19901 (City/State and Zip Code)
For further information concerning this matter, please call:
Westley Look at (302) 531-0703 (Area Code & Daytime Telephone Number)
Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

→ 8506176380

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RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, Incorporating Services, Ltd.
(Name of Registered Agent)
hereby resigns as Registered Agent for VIBEZ SOFTWARE CORP.
(Name of Corporation)
P20000055811
(Document Number, if known)
A copy of this resignation was mailed to the above listed corporation at its last known address. The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.
(Signature of Resigning Agent)
If signing on behalf of an entity:
Amanda Archambault (Typed or Printed Name)
Assistant Secretary (Capacity)

Fee for filing this document:

\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation