⊙ 07/27/2023 3:15 PM ET

Incorporating Servic

6/28/23, 6:01 PM

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000230243 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : INCORPORATING SERVICES, LTD.

Account Number : I20050000052

: (850)656-7956

Fax Number

: (850)656-7953

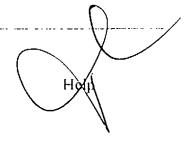
Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email:	Address:			
	Muuress.			

REGISTERED AGENT RESIGNATION SPROUT CAPITAL PARTNERS INC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$87.50

Electronic Filing Menu Corporate Filing Menu



COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: SPROUT CAPITAL PARTI	NERS INC
(Name of Corporation DOCUMENT NUMBER: P20000077144	on)
The enclosed Resignation of Registered Agent for a Corporat	ion and fee are submitted for filing.
Please return all correspondence concerning this matter to the	e following:
Westley Look	
(Name of Person)	·
Incorporating Services, Ltd.	
(Name of Firm/Company)	:
3500 S DuPont Hughway	
(Address)	ယ
Dover, DE 19901	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Westley Look at (302)	531-0703 © Daytime Telephone Number)
(Name of Person) (Area Code &	x 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

123000330243

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 SPROUT CAPITAL PARTNERS INC				
(Name of Corporation)				
P20000077144				
(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

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314