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.

(((H23000057170 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : RASI

Account Number : I20220000023 Phone : (800)221-2972 Fax Number : (917)243-5843

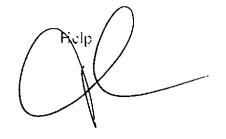
Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

REGISTERED AGENT RESIGNATION TOP CONTENDERS INC.

Certificate of Status	0
Certified Copy	U
Page Count	03
Estimated Charge	\$35.00

Electronic Filing Menu — Corporate Filing Menu



From: Tracee C

Page: 3 of 4

COVER LETTER

TO: Amendment Section Division of Corporations	
TOP CONTENDERS INC. SUBJECT:	
(Name of Corpora	iion)
DOCUMENT NUMBER: P21000002952	
The enclosed Resignation of Registered Agent for a Corpor	ration and fee are submitted for filing.
Please return all correspondence concerning this matter to	the following:
TRACEE COTTON	2023 I
(Name of Person)	
BLUMBERGEXCELSIOR CORPORATE SERVICES, INC.	2023 FEB 13
(Name of Firm/Company)	
100 WALL STREET, SUITE 1401	A 8: 16
(Address)	· · · · · · · · · · · · · · · · · · ·
NEW YORK, NY 10005	
(City/State and Zip Code)	_
For further information concerning this matter, please call:	
TRACEE COTTON 888 at (989-9589
(Name of Person) (Area Cod	_) e & 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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

From: Tracee C

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of secti	ons 607.0503(2), 617.0502(2), 607.1509, or 617.1509,		
Florida Statutes, the undersigned,	BLUMBERGEXCELSIOR CORPORATE SERVICES, INC.		
, 5 .	(Name of Registered Agent)	•	
hereby resigns as Registered Ager	TOP CONTENDERS INC.		
	(Name of Corporation)	-	
P21000002952			
(Document Number, if known)			
A copy of this resignation was ma	iled to the above listed corporation at its last known address		
The agency is terminated and the other this statement is filed.	office discontinued on the 31st day after the date on which	~ >	
	- (*)	023	
M	In Forder F.	2023 FEB 13	7
-	Signature of Resigning Agent)	<u>.</u>	Carres .
If signing on behalf of an entity:	Section 1	至	
	<u>មា</u> ជៈ មារ		
MARY BROOKS	EAT	8: 46	
	(Typed or Printed Name)	יט	
ASSISTANT SECR	RETARY		
	(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