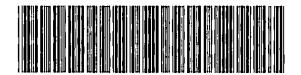
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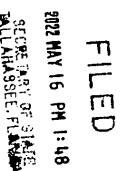
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Office Use Only



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COVER LETTER

| TO: Amendment Section Division of Corporations | |
|---|----|
| SUBJECT: Smokes Plus More Inc. | |
| (Name of Corporation) DOCUMENT NUMBER: P21000030003 | |
| The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing | g. |
| 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. | |
| 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 617.1509, | | |
|---|--|--|
| Florida Statutes, the undersigned, United States Corporation Agents, Inc. | | |
| (Name of Registered Agent) | | |
| hereby resigns as Registered Agent for Smokes Plus More Inc. | | |
| (Name of Corporation) | | |
| P21000030003 | | |
| (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) | | |
| f signing on behalf of an entity: | | |
| Cheyenne Moseley | | |
| (Typed or Printed Name) | | |
| Asst. Secretary for United States Corporation Agents, 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

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