Division of Corporations



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	Doing so will generate another cover sheet.	<u></u>
To:		<u>:-:</u>
	Division of Corporations	: _ , (
	Fax Number : (850)617-6380	
From:		(1) 17 (3) 14
	Account Name : COMPUTERSHARE	رن این
	Account Number : 110432003053	÷=!
	Phone : (561)694-8107	<u> </u>
	Fax Number : (561)214-8442	1.1

REGISTERED AGENT CHANGE LIVECELLS U.S.A., INC.

Certificate of Status	0
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Page Count	02
Estimated Charge	\$35.00

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Help



RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of secti	ons 607.0503(2), 617.0502(2), 607.1509,	or 617.150	09.	
Florida Statutes, the undersigned,	eResidentAgent, Inc.			
	(Name of Registered Ager	it)		_
hereby resigns as Registered Ager	nt for			
	(Name of Corporation)			
P21000088445				
(Document Number, if known)				
A copy of this resignation was ma	iled to the above listed corporation at its	last known	addre	ss.
The agency is terminated and the this statement is filed.	office discontinued on the 31st day after t	he date on	which	
\sim	A A A	- 13. - 13.	2023 DEC	
	(Signature of Resigning Agent)	_	\sim	ene.
If signing on behalf of an entity:		 	8 F	
Jeffrey A. Ung		ES IN	P⊮ փ: Ակ	
	(Typed or Printed Name)	щ	Ļ	
President of eRe	esidentAgent, 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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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