# P22000003516

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#### **COVER LETTER**

Division of Corporations	
WonderLost Adventures, Inc  SUBJECT:  (No. 10.10)	
(Name of Cor	poration)
DOCUMENT NUMBER: P22000003516	
The enclosed Resignation of Registered Agent for a Co	rporation and fee are submitted for filing.
Please return all correspondence concerning this matter	to the following:
Sarah Balen	
(Name of Person)	
MyCompanyWorks, Inc.	
(Name of Firm/Company)	<del></del>
187 E. Warm Springs Rd., Suite B	
(Address)	<del></del>
Las Vegas, NV 89119	
(City/State and Zip Code)	<del></del>
For further information concerning this matter, please c	eall:
Sarah Balen 702	362-2677
(Name of Person) (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

#### **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

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of section	ons 607.0503(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned,	Registered Agent Solutions, Inc.
riorida statutes, tile andersigned.	(Name of Registered Agent)
hereby resigns as Registered Agent for WonderLost Adventures, Inc	
, , , , , , , , , , , , , , , , , , , ,	(Name of Corporation)
P22000003516	
(Document Number, if known)	
A copy of this resignation was mail	led to the above listed corporation at its last known address.
The agency is terminated and the orthis statement is filed.	ffice discontinued on the 31st day after the date on which
/s/ Jennifer Pete	ers
	(Signature of Resigning Agent)
If signing on behalf of an entity:	
Jennifer Peters	
	(Typed or Printed Name)
Assistant Secretary o	of Registered Agent Solutions, 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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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