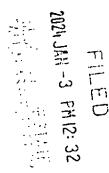
# P22000062235

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(2000)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.
J. HORNE DEC - 6 ZUZA

Office Use Only



000440546820



### Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

#### **ORDER FORM**

TO . Florida Department of State

The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Moreau mmoreau@incserv.com 850.656.7953

**REQUEST DATE** 01/03/2025

**PRIORITY** Routine

OUR REF. # (Order ID#) Westley

ORDER ENTITY

ATLAS STUDIO CO. US

PLEASE PERFORM THE FOLLOWING SERVICES:
ATLAS STUDIO CO. US
Please file the attached resignation.
NOTES:
\$35.00 Authorized
RETURN/FORWARDING INSTRUCTIONS: ACCOUNT NUMBER: 120050000052
Diamen hill the otherway and agreement for this and a

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

#### **COVER LETTER**

Division of Corporations	
SUBJECT: ATLAS STUDIO CO. US	
(Name of Corporation)	
DOCUMENT NUMBER: P22000062235	
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing	j.
Please return all correspondence concerning this matter to the following:	
Westley Look	
(Name of Person)	
Incorporating Services, Ltd.	
(Name of Firm/Company)	
3500 S DuPont Hughway	
(Address)	
Dover, DE 19901	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Westley Look (Name of Person)  at (302) 531-0703 (Area Code & Daytime Telephone Number)	
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO: Amendment Section

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, Incorporating Services, Ltd.
(Maure of Kegistered Agent)
hereby resigns as Registered Agent for ATLAS STUDIO CO. US  (Name of Corporation)
(Name of Corporation)
P22000062235
(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.
Colonature of Risigning Agent)
$\mathcal{O}$
If signing on behalf of an entity:
Westley Look
('i'yped 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