Requester's Name Phone

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

| 1 | |
|--|--|
| (Corporation Name) | (Document #) 600003120446 -02/02/0001039007 |
| (Corporation Name) | (Document #) ******87.50 ******87.50 |
| (Corporation Name) | (Document #) |
| 4. (Corporation Name) | (Document #) |
| Walk in Pick up time Mail out Will wait NEW FILINGS Profit Not for Profit Limited Liability Domestication Other OTHER FILINGS | Photocopy Certificate of Status AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger REGISTRATION/QUALIFICATION |
| ☐ Annual Report ☐ Fictitious Name | Foreign Limited Partnership Reinstatement Trademark Other |
| ' ' የድን <u>ነ</u> በ31/7/07\ | Examiner's Initials |

RESIGNATION OF REGISTERED AGENT

| Pursuant to the provisions of secti | ions 607.0502(2), 617.0502(2), 607.1509, or 617 | ⁷ .1509, |
|---|---|--|
| Florida Statutes, the undersigned, | Kaymovo M. Di Rocco (Name of registered agent) | |
| hereby resigns as Registered Ager | nt for Dealmakers, USA, Inc. (Name of corporation) | |
| A copy of this resignation was ma | iled to the above listed corporation at its last know | wn address. |
| The agency is terminated and the other this statement is filed. | office discontinued on the 31st day after the date | on which |
| - fefte | MMW (Signature of resigning agent) | 00 FEB -4 SECRETARY |
| If signing on behalf of an entity: | | PH 2: 25 OF STATE E. FLORIDA |
| | (Typed or Printed Name) | 144 miles (144 miles) |
| | | |
| | (Capacity) | and the second of the second o |

Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314