


## Revocation, Appointment, and/or Change of Address of Attorney/Domestic Representative

### Handwritten Signature

**Signature Section:**

Signature: 

Date: April 8, 2019

Signatory's Name: Jonathan Wolfson

Signatory's Position: CEO and Founder

Signatory's Phone Number: [not required]

**NOTE TO APPLICANT:** When filed as part of the electronic form (i.e., scanned and attached as an image file), include only the signature page (no declaration is required, nor should any other information from the actual revocation be included).

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