

FD5000006790

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

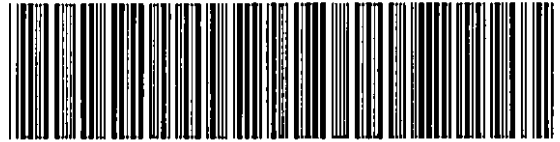
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

File 10T

Office Use Only



600319784346

2018 NOV - 5 AM 11: 34

DEPARTMENT OF REVENUE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

18 NOV - 5 AM 11: 19

RECEIVED

NOV 05 2018
C. McALPIN

cm

CT CORP
3458 Lakeshore Drive, Tallahassee, FL 32312
850-656-4724

SUBMITTED
 11/14/2018
 5:41:54 PM

Date: 11/5/2018

 Acc#|20160000072

eric DW

Name:	JERRDAN CORPORATION
Document #:	
Order #:	11239272

Certified Copy of Arts & Amend:	<input type="checkbox"/>	
Plain Copy:	<input type="checkbox"/>	
Certificate of Good Standing:	<input type="checkbox"/>	
	<input type="checkbox"/>	
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:
		Number of Certs:

Filing: <input checked="" type="checkbox"/>	Certified: <input checked="" type="checkbox"/>
	Plain: <input type="checkbox"/>
	COGS: <input type="checkbox"/>

This is a 1 - 2 filing.

- Please process the withdrawal.
- Please process the registration.

Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ **43.75**

Thank you so much!

Thank you!

COVER LETTER

2018 NOV -5 AM 11: 36

TO: Amendment Section
Division of Corporations

SUBJECT: JerrDan Corporation

(Name of Corporation)

DOCUMENT NUMBER: F05000006790

The enclosed withdrawal application and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lori Mackey

(Name of Person)

Oshkosh Corporation

(Firm/Company)

2307 Oregon Street, PO Box 2566

(Address)

Oshkosh, WI 54903-2566

(City/State and Zip code)

For further information concerning this matter, please call:

Lori Mackey at (920) 235-9151 x22900

(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the amount:

\$35 Filing Fee \$43.75 Filing Fee & \$43.75 Filing Fee & \$52.50 Filing Fee,
Certificate of Status Certified Copy Certificate of Status & Certified
(Additional copy is Enclosed) Copy (Additional copy is enclosed)

MAILING ADDRESS:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL.32314

STREET ADDRESS:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL. 32301

**APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF
AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA**

JerrDan Corporation

(Name of Corporation)

F05000006790

(Document Number of Corporation (if known))

Delaware

(Incorporated Under Laws of)

2008 NOV -5 PM 11:35
RECEIVED
STATE OF FLORIDA
SECRETARY OF STATE

This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.

This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.

The following is a current mailing address for the corporation:


13224 Fountainhead Plaza

(Mailing Address)

Hagerstown, MD 21742

(City/ State //ip)

The corporation agrees to notify the Department of State in the future of any change in its mailing address.



(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

10/30/2018

(Date)

Ignacio A. Cortina

(Typed or printed name of person signing)

EVP and Secretary

(Title of person signing)

FILING FEE \$35