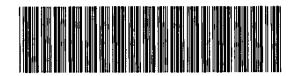
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(Re	equestor's Name)			
(Ad	idress)			
(Ac	idress)	· 		
(Cit	ty/State/Zip/Phone	= #)		
PICK-UP	₩ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to	Filing Officer:			
		:		

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APR 18 2017 R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations		
Eletout Elethrope	l Inc.	
SUBJECT: Flatout Flatbleac	(Name of Corpor	ration)
DOCUMENT NUMBER: F14000	001478	
The enclosed withdrawal application and	d fee are submitted t	for filing.
Please return all correspondence concerning matter to the following:	ig this	
Barry Besece		
	(Name of Person	n)
Flatout Inc.		
	(Firm/Company)
380 Polaris Parkwa	ı y	
	(Address)	
Westerville, OH 430	082	
(City/State and Zip o	code)
For further information concerning this ma	tter, please call:	
Barry Besece	_{at (} 614	₎ 396-3127
(Name of Person) Enclosed is a check for the amount:	(Area	Code & Daytime Telephone Number)
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing For Certified Copy (Additional cop Enclosed)	Certificate of Status & Certified
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

Flatout Flatbread Inc.				
(Name of Corporation)				
F14000001478				
(Document Number of Corporation (if known)			
Delaware				
(Incorporated Under Laws of	Ŋ			
This corporation is no longer transacting business or conducting af voluntarily surrenders its authority to transact business or conduct a			of Florida an	ıd hereby
This corporation revokes the authority of its registered agent in I appoints the Department of State as its agent for service of proces the time it was authorized to transact business or conduct affairs in	s based on			ng during
The following is a current mailing address for the corporation:				, <u>, </u>
380 Polaris Parkway			•	型 2 2
(Mailing Address)			المين الأ المينية المعاد	57
Westerville, OH 43082			Ť	
(City/ State /Zip)			***************************************	
The corporation agrees to notify the Department of State in the futu	re of any cl	nange in its	s mailing add	ress.
04/06/2017		7		
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)		(Date)	
Matthew R. Shurte	Asst.	Corp.	Secret	ary
(Typed or printed name of person signing)	(Title of person signing)			

FILING FEE \$35