F21000000087

| | Requestor's Name) | <u>.</u> | | | | | |
|--|-------------------------|----------|--|--|--|--|--|
| (Address) | | | | | | | |
| (Address) | | | | | | | |
| (| City/State/Zip/Phone #) | | | | | | |
| B-Ck (ib) | WAIT | MAIL | | | | | |
| (Business Entity Name) | | | | | | | |
| (Document Number) | | | | | | | |
| Certified Copies | Certificates of Sta | tus | | | | | |
| Special Instructions to Filing Officer | | | | | | | |
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Office Use Only



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CHELLING TE SEC.

WAY 1 - 2021

CORPORATION SERVICE COMPANY

XX CERTIFICATE OF STATUS

CONTACT PERSON: Alexxis Weiland - EXT#

1201 Hays Street

Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE : 809428 8322732 AUTHORIZATION : COST LIMIT : ORDER DATE: May 12, 2021 ORDER TIME : 12:16 PM ORDER NO. : 809428-005 CUSTOMER NO: 8322732 FOREIGN FILINGS NAME: ACAC INC. XX CORPORATE ___ LIMITED PARTNERSHIP ____ LIMITED LIABILITY COMPANY XXXX WITHDRAWAL/CANCELLATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: ____ CERTIFIED COPY ____ PLAIN STAMPED COPY

EXAMINER:

COVER LETTER

| | dment Section on of Corporations | | | |
|--------------------------|--|----------------------------|--|--|
| SUBJECT: | ACAC Inc dba Liberty Tax & Loan | s | | |
| | | (Name of C | Corporation) | |
| DOCUMEN | T NUMBER: CCA9904493 | | | |
| The enclosed | withdrawal application and | fee are subm | itted for filin | g. |
| Please return | all correspondence concerning | g this matter i | to the followi | ng: |
| Rebe | ecca Lee Preston | | | |
| | | (Name of F | Person) | |
| ACA | C Inc dba Liberty Tax & Loans | | | |
| | | (Firm/Con | ıpany) | |
| 1865 | Executive Park Dr NW | | | |
| | | (Addre | ss) | |
| Cleve | eland TN 37312 | | | |
| | (0 | City/State and | Zip code) | |
| For further in | formation concerning this mat | ter, please ca | all: | |
| Rebecca Lee Pro | eston | at (| | 614-2326 |
| | (Name of Person) | | (Area Code & | & Daytime Telephone Number) |
| Enclosed is a | check for the amount: | | | |
| □ \$35 Filing | Fee ■ \$43.75 Filing Fee & Certificate of Status | Certified (| Copy al copy is | □ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) |
| Amen Divisi P.O. B | z Address: dment Section on of Corporations Box 6327 assee, FL 32314 | Ame Divi The 241: | et Address: endment Sect ision of Corp Centre of Ta 5 N. Monroe ahassee, FL 3 | orations Hahassee Street, Suite 810 |

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

(Name of Corporation)

ACAC Inc

| F21000 | 000087 | | | | | |
|--------------------------------|--|---|-------------------------------------|--|--|--|
| | (Document Number o | f Corporation (if known) | | | | |
| Delaware | Corporation 01/06/2021 | | | | | |
| (In | corporated Under Laws of and date author | ized to transact business/conduct its a | affairs) | | | |
| | s no longer transacting business or c ders its authority to transact business | | te of Florida and hereb | | | |
| appoints the Depa | revokes the authority of its register rtment of State as its agent for servic ized to transact business or conduct a | e of process based on a cause of | | | | |
| The following is a | current mailing address for the corp | oration; | | | | |
| 1865 Exe | cutive Park Dr NW | | | | | |
| | (Mailing | Address) | | | | |
| Cleveland | TN 37312 | | | | | |
| | (City/S | tate /Zip) | | | | |
| | | | - (C | | | |
| The corporation a | grees to notify the Department of Sta | te in the future of any change in | its mailing address. | | | |
| Q.C | | 5/10/2021 | # 38 FL | | | |
| (Signature of a receiver or or | director, president or other officer - if in the hand her court appointed fiduciary, by that fiduciary) | ds of a (D | ate) | | | |
| R. Lee Pres | on | Director of Real Est | Director of Real Estate & Licensing | | | |
| | d or printed name of person signing) | | (Title of person signing) | | | |

FILING FEE \$35