M18000003231

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K SALY
MAR - 6 2018

Orion State Licensing, Inc.

VIA OVERNIGHT DELIVERY **February 22, 2018**

Florida Department of State
New Filing Section Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

Re: KeyMed Data Services LLC
Withdrawal/ Surrender of Authority

Dear Sir or Madam,

Please find enclosed the above-referenced document for filing along with the supporting documents and/or fees.

If you have any questions, please contact the undersigned.

Very truly yours,
Orion State Licensing, Inc.

Janet Lopez, CEO

Please return the document to Orion State Licensing, Inc. at 15615 Alton Parkway, Suite 450 Irvine, CA 92618

Tel. (888) 315-0805 Fax (888) 315-0806 email janet@orionlicensing.com
15615 Alton Parkway, Ste. 450 Irvine, CA 92618

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KeyMed Data Services LLC
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Samara Keaton
(Name of Person)

KeyMed Data Services LLC
(Firm/Company)

1121 Situs Ct., Ste. 285
(Address)

Raleigh, NC 27606
(City/State and Zip Code)

For further information concerning this matter, please call:

Samara Keaton at (770) 683-3826
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- ❑ $25 Filing Fee
- ❑ $30 Filing Fee & Certificate of Status
- ❑ $55 Filing Fee & Certified Copy
- ❑ $60 Filing Fee, Certificate of Status & Certified Copy

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

KeyMed Data Services LLC

(Name of limited liability company)

Georgia

(Jurisdiction of its organization)

06/23/2011

(Date registered with Florida Department of State)

M11000003231

(Florida Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

This limited liability company is withdrawing its certificate of authority in this state.

Effective Date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(Signature of authorized representative)

Samara Keaton

(Typed or printed name of signee)

Filing Fee: $25.00