F9600000 2934

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ви	siness Entity Nar	me)
(Do	ocument Number)	
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C. CARROTHERS

1311 SEP 16 AH 7:00

COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: 209 Associates, Inc.			
(Name of Corporation)			
DOCUMENT NUMBER: F9600002934			
The enclosed withdrawal application and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Kim Guzzo			
(Name of Person)			
Casto			
(Firm/Company)			
250 Civic Center Drive, Suite 500			
(Address) Columbus, Ohio 43215			
(City/State and Zip code)			
For further information concerning this matter, please call:			
Kim Guzzo at (614)227-3497			
(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)			
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

(Name of Corporation)

209 Associates, Inc.

F9600002934 (Document Number of Corporatio	n (if known)	
Ohio		
(Incorporated Under Law	rs of)	
This corporation is no longer transacting business or conducting voluntarily surrenders its authority to transact business or conducting	•	
This corporation revokes the authority of its registered agent is appoints the Department of State as its agent for service of proceeding it was authorized to transact business or conduct affairs	cess based on a cause of action arising during	
The following is a current mailing address for the corporation:		
250 Civic Center Drive, Suite	500 AH 7:	
(Mailing Address)	<u> </u>	
Columbus, Ohio 43215		
(City/ State /Zip)		
The corporation agrees to notify the Department of State in the formula Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	uture of any change in its mailing address. 08-31-2016 (Date)	
Frank S. Benson III (Typed or printed name of person signing)	President (Title of person signing)	

FILING FEE \$35