

DO1000000002

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

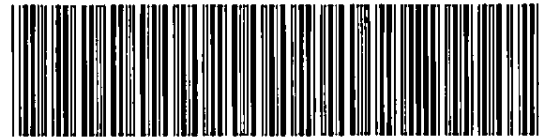
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700422522167

Withdrawal of declaration
of Trust

01/01/24--0101--001 **35.00

CO

RECEIVED

2024 JAN 25 PM 3:21

A. RAMSEY

FEB -1 2024

A. RAMSEY

FEB -1 2024

2024 JAN 25 AM 9:04

FILED

*02250,00524, 00167, 00671



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 30, 2024

CORPORATION SERVICE COMPANY

TALLAHASSEE, FL 32301

SUBJECT: COMPUSA MANAGEMENT COMPANY
Ref. Number: D01000000002

RESUBMIT
Please give original
submission date as file date.

We have received your document for COMPUSA MANAGEMENT COMPANY and the authorization to debit your account in the amount of \$35.00. However, the document has not been filed and is being returned for the following:

The fee for this document can not be paid using a walk-in account. Please send a check for \$35.00 when you resubmit the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Annette Ramsey
OPS

Letter Number: 124A00001938

RECEIVED

2024 JAN 31 AM 11:14

SUBMITTED TO STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 26, 2024

CORPORATION SERVICE COMPANY

TALLAHASSEE, FL 32301

SUBJECT: COMPUSA MANAGEMENT COMPANY
Ref. Number: D01000000002

RESUBMIT

Please give original
submission date as file date.

We have received your document for COMPUSA MANAGEMENT COMPANY and the authorization to debit your account in the amount of \$25.00. However, the document has not been filed and is being returned for the following:

Please remove the words "Foreign Corporation" and substitute "Declaration of Trust". The fee for this document can not be paid for by using the walk-in account. Please send a check for \$35.00 when you resubmit the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Annette Ramsey
OPS

Letter Number: 624A00001701

TALLAHASSEE, FL 32301

2024 JAN 29 AM 11:24

2024 JAN 29



CSC - Tallahassee
1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext: 61592

To: Department Of State, Division Of Corporations
From: Alexxis Weiland-Sorenson
Ext: 61592
Date: 01/25/24
Order #: 1396664-1
Re: CompUSA Management Company
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Withdrawal

AUTH:

Amount to be deducted from our State Account: \$25.00 - FL State Account Number:
120000000195

A handwritten signature in black ink, appearing to read 'Alexxis Weiland-Sorenson', is written over the text of the state account number.

Please take the following action:

File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

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

CompUSA Management Company

(Name of ~~Corporation~~ / Declaration of Trust)

D01000000002

(Document Number of ~~Corporation~~ (if known))

Delaware 2/5/2001

(Incorporated Under Laws of and date authorized to transact business/conduct its affairs)

/ Declaration of Trust

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.

Declaration of Trust

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~~ / Declaration of Trust:

14951 N Dallas Parkway

(Mailing Address)

Dallas, TX 75240

(City/ State /Zip)

/ Declaration of Trust

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

Patricia E. Parent

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

1/25/2024

(Date)

Patricia E. Parent

(Typed or printed name of person signing)

President

(Title of person signing)

FILING FEE \$35