

D130000000/3

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

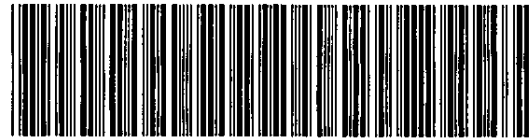
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/20/15--01026--010 **35.00

FILED
15 MAY 11 PM 12:24
CLERK OF COURT
PALM BEACH COUNTY
FLORIDA

Withdrawal
Dec. of Trust

05-13-15

De



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 5, 2015

MICHAEL GIST
GIST GLOBAL TRUST
181 SOUTH WASHINGTON ST.
ORMOND BEACH, FL 32174

SUBJECT: GIST GLOBAL TRUST
Ref. Number: D13000000013

We have received your document for GIST GLOBAL TRUST, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

The fee to file your document is \$35.

WE WILL BE CORRECTING THE WITHDRAWAL STRIKING OUT THE WORD "INCORPORATION" AND REPLACING IT WITH THE WORDING "DECLARATION OF TRUST".

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.

Darlene Connell
Regulatory Specialist III

Letter Number: 315A00009310

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Gist Global Trust

(Name of Corporation)

Dec. of Trust

DOCUMENT NUMBER: D13000000013

The enclosed **withdrawal application** and fee are submitted for filing.

Please return all correspondence concerning this
matter to the following:

Michael Gist

(Name of Person)

Gist Global Trust

(Firm/Company)

181 South Washington Street

(Address)

Ormond Beach, Florida 32174

(City/State and Zip code)

For further information concerning this matter, please call:

Michael

(Name of Person)

at (386) 405-5448

(Area Code & Daytime Telephone Number)

Enclosed is a check for the amount:

- ☒ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is Enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (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

Dear Division of Corporations,

I have mailed the fee for the Withdrawal separately.

It should arrive around the same time as this filing.

Regards,

Michael Gist

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

Gist Global Trust

(Name of Declaration of Trust)

D13000000013

(Document Number of Declaration of Trust)

Delaware

(Filed Declaration of Trust Under Laws of)

This Declaration of Trust 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.

This Declaration of Trust 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 Declaration of Trust :


181 S. Washington Street

(Mailing Address)

Ormond Beach, Florida 32174

(City/ State /Zip)

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


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

02-24-2015

(Date)

Michael Gist

(Typed or printed name of person signing)

President

(Title of person signing)

FILING FEE \$35