

FOOOOOO 1668

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

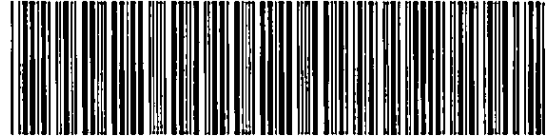
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

28TH AUG 28 P 2 22

FILED

SEP 3 1 2017

EMIEU

WD

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Mohrlee Management Corp.
(Name of Corporation)

DOCUMENT NUMBER: F00000001668

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

Please return all correspondence concerning this matter to the following:

Alexander Waters

(Name of Person)

Long, Ragsdale & Waters, P.C.

(Firm/Company)

1111 N. Northshore Drive, Suite S-700

(Address)

Knoxville, Tennessee 37919

(City/State and Zip code)

For further information concerning this matter, please call:

Alexander O. Waters at (865) 584-4040

(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 ☐ \$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

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

Mohrlee Management Corp.

(Name of Corporation)

F00000001668

(Document Number of Corporation (if known))

New York

(Incorporated Under Laws of)

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.

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:

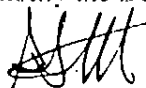
1 Rockefeller Plaza, Suite #1712

(Mailing Address)

New York, NY 10020

(City/ State /Zip)

The corporation 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)

Stanley Mohr

(Typed or printed name of person signing)

August 14, 2017

(Date)

President

(Title of person signing)

FILED
AUG 28 2017
SECRETARY OF STATE
TREASURY
FLORIDA

FILING FEE \$35

CERTIFICATE OF DISSOLUTION OF

Mohrlee Management Corp.

(Insert Name of Corporation)

Under Section 1003 of the Business Corporation Law

FIRST: The name of the corporation is:

Mohrlee Management Corp.

If the name of the corporation has been changed, the name under which it was formed is:

Mohr Management Corp.

SECOND: The certificate of incorporation was filed with the Department of State on:

July 7, 1999

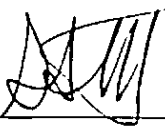
THIRD: The name and address of each officer and director of the corporation is:

Stanley Mohr
1 ROCKEFELLER PLAZA
Suite # 1712
NEW YORK, NY 10020

FOURTH: *(Check the statement that applies)*

- ☐ The dissolution was authorized at a meeting of shareholders by two-thirds of the votes of all outstanding shares entitled to vote.
- ☐ The dissolution was authorized at a meeting of shareholders by a majority of the votes of all outstanding shares entitled to vote.
- ☒ The dissolution was authorized by the unanimous written consent of the holders of all outstanding shares entitled to vote without a meeting.

FIFTH: The corporation elects to dissolve.

X 
(Signature)

Stanley Mohr
(Print or Type Name of Signer)

President
(Print or Type Title of Signer)

CERTIFICATE OF DISSOLUTION
OF

Mohrlee Management Corp.
(Insert Name of Corporation)

Under Section 1003 of the Business Corporation Law

Filer's Name: Long, Ragsdale & Waters, P.C., Attn: Alexander Waters

Address: 1111 N. Northshore Drive, Suite S-700

City, State and Zip Code: Knoxville, Tennessee 37919

NOTES:

1. The name of the corporation and its date of incorporation must be exactly as they appear on the records of the Department of State. This information should be verified on the Department of State's web site at www.dos.ny.gov.
2. This certificate must be signed by an officer, director or duly authorized person.
3. Attach the consent of the NYS Department of Taxation and Finance.
4. Attach the consent of the New York City Department of Finance, if required.
5. The fee for filing this certificate is \$60, made payable to the Department of State.

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