

F0500000/024

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORP. DIVISION

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

GIRM
12715

ACCOUNT NO. : I20000000195

REFERENCE : 476495 7841736

AUTHORIZATION :

COST LIMIT : \$ 354.00

ORDER DATE : January 23, 2015

ORDER TIME : 3:55 PM

ORDER NO. : 476495-035

CUSTOMER NO: 7841736

FOREIGN FILINGS

NAME: ABILITY SERVICES NETWORK, INC.

☒ CORPORATE
☐ LIMITED PARTNERSHIP
☐ LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF STATUS

CONTACT PERSON: Unassigned - EXT#

EXAMINER: _____

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TALLAHASSEE, FLORIDA

476495



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 27, 2015

CSC

RESUBMIT

Please give original
submission date as file date.

SUBJECT: ABILITY SERVICES NETWORK, INC.
Ref. Number: F05000001024

We have received your document . However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

If you have any questions concerning the filing of your document, please call (850) 245-6838.

Cheryl R McNair
Regulatory Specialist II

Letter Number: 015A00001589

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RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
15 JAN 28 PM 4:23
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TO ACKNOWLEDGE
SUFFICIENCY OF FILING

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

Ability Services Network, Inc.

(Name of Corporation)

F05000001024

(Document Number of Corporation (if known))

Georgia

(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:

3280 Peachtree Road, Suite 2625

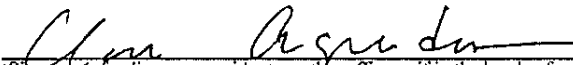
(Mailing Address)

Atlanta, GA 30305

(City/ State /Zip)

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TALLAHASSEE FLORIDA

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)

Clare Arguedas

(Typed or printed name of person signing)

1/28/2015

(Date)

GC, EVP, and Secretary

(Title of person signing)

FILING FEE \$35