

F05000003710

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

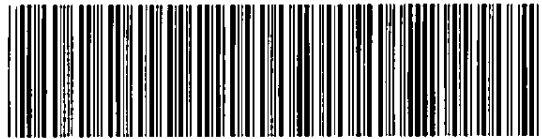
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2025 FEB -6 PM 3:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

2025 FEB -6 PM 12:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILE 1ST.

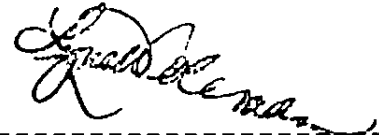
CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 593776 7706785

AUTHORIZATION :

COST LIMIT : \$ 35.0



ORDER DATE : August 13, 2024

ORDER TIME : 2:02 PM

ORDER NO. : 593776-035

CUSTOMER NO: 7706785

FOREIGN FILINGS

NAME: SULLIVANCOTTER, 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: Amanda Miller - EXT#

EXAMINER: _____

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SullivanCotter, Inc

(Name of Corporation)

DOCUMENT NUMBER: F05000003710

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

Please return all correspondence concerning this matter to the following:

(Name of Person)

(Firm/Company)

(Address)

(City/State and Zip code)

For further information concerning this matter, please call:

(Name of Person)

at (_____) _____

(Area Code & Daytime Telephone Number)

Enclosed is a check for the amount:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
Enclosed) | <input type="checkbox"/> \$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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

SullivanCotter, Inc.

(Name of Corporation)

F05000003710

(Document Number of Corporation (if known))

Illinois

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

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:

224 W. 35th Street, Suite 500 # 110

(Mailing Address)

New York, NY 10001

(City/ State /Zip)

FILED
2025 FEB -6 PM 12:50
TALLAHASSEE, FLORIDA
DEPT. OF STATE

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

Rachel Wilson

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

12/2/2024

(Date)

Rachel Wilson

(Typed or printed name of person signing)

Secretary

(Title of person signing)

FILING FEE \$35

593776