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DISSOLUTION OR WITHDRAWAL SIG FINANCING, INC.

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COVER LETTER

	Amendment Sec Division of Corp	•		
SUBJE	ECT:	SIG FINANCING, I	INC.	
			(Name of Corporation	n)
DOCU	MENT NUMBE	R: <u>F06000001875</u>		
The en	closed withdraw	al application and fo	e are submitted for fil	ing.
	return all correspo	ondence concerning t	his	
	w me rono mig.	Cele	este Stellabott	
			(Name of Person)	
		c/o :	SIG LLP	
			(Firm/Company)	
		401 E. City	y Avenue, Suite 220	
•			(Address)	(
		Bala Cy	nwyd, PA 19004	
	-	(Ci	ty/State and Zip code)	
For furt	ther information of	concerning this matte	r, plcase call:	
	Celeste	Stellabott	(484	1) 562-1255
Enclose	(Name of ed is a check for t	Person)	(Area Cod	e & Daytime Telephone Number)
\$35	Filing Fee \$43.7.	5 Filing Fee & ertificate of Status	\$43.75 Filing Fcc & Certified Copy (Additional copy is Enclosed)	\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
	Amendm Division P.O. Box	G ADDRESS: ent Section of Corporations 6327 ee, 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

SIG FINANCING, INC.	
(Name of Corporation)	
F06000001875	
(Document Number of Corporation (if	known)
DELAWARE	
(Incorporated Under Laws of)	
This corporation is no longer transacting business or conducting affi	
This corporation revokes the authority of its registered agent in F appoints the Department of State as its agent for service of process the time it was authorized to transact business or conduct affairs in F	based on a cause of action arising during
	iona.
The following is a current mailing address for the corporation:	Ø € 8 €
555 SOUTH FEDERAL HIGHWAY, SUITE	400
(Mailing Address)	25 0 0
BOCA RATON, FL 33432	34. 6
(City/ State /Zip)	
•	•
The corporation agrees to notify the Department of State in the future	of any change in its mailing address.
1:	6:01-11
(Signature of a director, president or other officer - If in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	6-21-16 (Date)
BRIAN SULLIVAN	TREASURER
(Typed or printed name of person signing)	(Title of person signing)

FILING FEE \$35