## F0600000Z1Z9

| (Requestor's Name)                      |  |  |  |
|---|--|--|--|
| (Address)                               |  |  |  |
| (Address)                               |  |  |  |
|   |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |
| (Business Entity Name)                  |  |  |  |
| (Exerced Entry Name)                    |  |  |  |
| (Document Number)                       |  |  |  |
| Certified Copies Certificates of Status |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |
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## COVER LETTER

| TO:           | Amendment Section Division of Corporations  |   |
|---------------|---|---|
| SUBJ          | RLM CONSULTING, INC.  |   |
| SUDJ          | ECI:  | (Name of Corporation)   |
| DOC           | UMENT NUMBER: F06000002129  |   |
| The er        | nclosed withdrawal application and  | fee are submitted for filing.   |
| Please        | return all correspondence concernin   | g this matter to the following:   |
|               | R. LANCE MOHR   |   |
|               |   | (Name of Person)  |
|               | RLM CONSULTING INC  |   |
|               | <u></u>   | (Firm/Company)  |
|               | 10232 ARBOR SIDE DR   |   |
|               |   | (Address)   |
|               | TAMPA, FL 33647-2951  |   |
|               | (0  | City/State and Zip code)  |
| For fu        | rther information concerning this ma  | itter, please call:   |
| GARR          | Y G SCHIERLING  | at ( ) 385-0007   |
|               | (Name of Person)  | (Area Code & Daytime Telephone Number)  |
| Enclo         | sed is a check for the amount:  |   |
| <b>■</b> \$3: | 5 Filing Fee  | Certified Copy (Additional copy is Enclosed)  \$43.75 Filing Fee & \$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

| RLM CONSULTING, INC   |  |  |  |
|---|--|--|--|
| (Name of Corporation)   |  |  |  |
| F06000002129  |  |  |  |
| (Document Number of Corporation (if   | known)                                       |  |  |
| Texas   |  |  |  |
| (Incorporated Under Laws of and date authorized to transact b   | ousiness/conduct its affairs)                |  |  |
| This corporation is no longer transacting business or conducting affavoluntarily surrenders its authority to transact business or conduct affavoluntarily   |  |  |  |
| This corporation revokes the authority of its registered agent in Flappoints the Department of State as its agent for service of process batime it was authorized to transact business or conduct affairs in Florida. | ased on a cause of action arising during the |  |  |
| The following is a current mailing address for the corporation:   |  |  |  |
| 10232 ARBOR SIDE DR   | . <del></del>                                |  |  |
| (Mailing Address)   | <del></del>                                  |  |  |
| TAMPA. FL 33647-2951  | <del></del><br>                              |  |  |
| (City/ State /Zip)  |  |  |  |
| The corporation agrees to notify the Department of State in the future  | e of any change in its mailing address.      |  |  |
| (Signature of a director, president or other office—If in the hands of a receiver or other court appointed fiduciary, by that fiduciary)  | (Date)                                       |  |  |
| R. LANCE MOHE   | PRESIDENT                                    |  |  |

**FILING FEE \$35** 

(Title of person signing)

(Typed or printed name of person signing)