Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone

: (850)205-8842

Fax Number : (850)878-5368

DISSOLUTION OR WITHDRAWAL FEDEX TECHCONNECT, INC.

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\$35.00

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Corporate Filing Menu

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JUN - 3 2016

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COVER LETTER

Division of Corporațions
SUBJECT: FedEx TechConnect, Inc.
(Name of Corporation)
DOCUMENT NUMBER: F06000003642
The enclosed withdrawal application and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Person)
FedEx TechConnect, Inc.
(Firm/Company)
(Address)
(City/State and Zip code)
For further information concerning this matter, please call:
at ()
(Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the amount:
\$35 Filing Fee \$43.75 Filing Fee & \$43.75 Filing Fee & \$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified (Additional copy is Enclosed) Copy (Additional copy is enclosed)
THE ATTIME AND THE CONTROL AND THE

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

	(Name of	Corporation)
F060	000003642	•
	(Document Number o	f Corporation (if known)
Del:	ware	
	(incorporated	Under Laws of)
	ion is no longer transacting business or our	conducting affairs within the State of Florida and hereby or conduct affairs in Florida.
ppoints the l	tion revokes the authority of its register Department of State as its agent for serv is authorized to transact business or cond	ed agent in Florida to accept service on its behalf and ice of process based on a cause of action arising during act affairs in Florida.
he following	g is a current mailing address for the corp	oration:
942	South Shady Grove Road, c/o FedEx Services L	cgal Dept
	(Mailing	g Address)
Men	nphis, TN 38120	
<u> </u>	(City/ S	State /Zip)
he corporati	on agrees to notify the Department of Ste	ate in the future of any change in its mailing address.
	Teres IIII VIII	
(Signato recolve	ife of a director, president or other officer - if in the har or other court appointed fiduciary, by that fiduciary)	June 1, 2016 ds of a (Date)
C. Bdı	ward Klank III	Secretary
·	(Typed or printed name of person signing)	(Title of person signing)

FILING FEE \$35