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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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MAIL

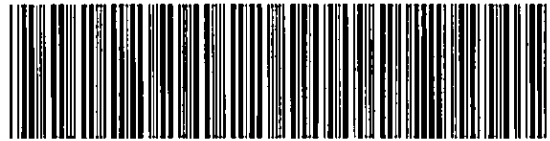
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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01/14/20--01013--017 \*\*10.00

11/04/19--01041--001 \*\*25.00

2020 Jan 14 AM 9:23

R. WHITE

JAN 15 2020



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 6, 2019

BRIAN WEBER  
C/O KEN WILDSTEIN  
1 N CASTLE DR  
ARMONK, NY 10504-1784

SUBJECT: KYANITE SERVICES, INC.  
Ref. Number: F06000007649

We have received your document for KYANITE SERVICES, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White  
Regulatory Specialist II Supervisor

Letter Number: 219A00024765

LS:LHV L-1110702

[www.sunbiz.org](http://www.sunbiz.org)

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: KYANITE SERVICES, INC.

(Name of Corporation)

DOCUMENT NUMBER: F06000007649

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

Please return all correspondence concerning this matter to the following:

-BRIAN WEBER

(Name of Person)

IBM

(Firm/Company)

2105 LODESTAR DRIVE

(Address)

RALEIGH, NC 27615

(City/State and Zip code)

For further information concerning this matter, please call:

BRIAN WEBER

(Name of Person)

at ( 919 )

402-6840

(Area Code & Daytime Telephone Number)

Enclosed is a check for the amount:

- ☒ \$35 Filing Fee    ☐ \$43.75 Filing Fee & Certificate of Status    ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is Enclosed)    ☐ \$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**

KYANITE SERVICES, INC.

\_\_\_\_\_  
(Name of Corporation)

F06000007649

\_\_\_\_\_  
(Document Number of Corporation (if known))

DELAWARE

\_\_\_\_\_  
(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:


3039 CORNWALLIS

\_\_\_\_\_  
(Mailing Address)

RTP, NC 27709

\_\_\_\_\_  
(City/ State /Zip)

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)

December 23, 2019

\_\_\_\_\_  
(Date)

LESLIE A. PEELER

\_\_\_\_\_  
(Typed or printed name of person signing)

PRESIDENT

\_\_\_\_\_  
(Title of person signing)

**FILING FEE \$35**