

# FOL000007952

\_\_\_\_\_  
(Requestor's Name)

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

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

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

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

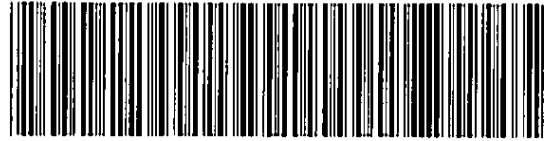
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

J. HORNE

JUL 25 2022

Office Use Only



400389186584

RECEIVED

2022 JUL 22 PM 3:38

ATTORNEY GENERAL

FILED


2022 JUL 22 AM 8:12

SECRETARY OF STATE  
TALLAHASSEE, FL 32399

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

ACCOUNT NO. : I20000000195

REFERENCE : 822872 7426667

AUTHORIZATION : 

COST LIMIT : \$ 35.00

-----  
ORDER DATE : July 19, 2022

ORDER TIME : 12:47 PM

ORDER NO. : 822872-005

CUSTOMER NO: 7426667  
-----

FOREIGN FILINGS

NAME: CUSTOMERONE FINANCIAL  
NETWORK, INC.

XX CORPORATE  
       LIMITED PARTNERSHIP  
       LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF STATUS

CONTACT PERSON: Alexxis Weiland - EXT#

EXAMINER: \_\_\_\_\_

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Customerone Financial Network, Inc.

(Name of Corporation)

**DOCUMENT NUMBER:** F06000007952

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

Please return all correspondence concerning this matter to the following:

Kevin L. Baker

(Name of Person)

Customerone Financial Network, Inc.

(Firm/Company)

301 West Bay Street

(Address)

Jacksonville, FL 32202

(City/State and Zip code)

For further information concerning this matter, please call:

Kevin Baker

at ( 904 )

930-3289

(Name of Person)

(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**

Customerone Financial Network, Inc.

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

F06000007952

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

Delaware 12/29/2006

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

FILED  
2022 JUL 22 AM 8:12  
SECRETARY OF STATE  
TALLAHASSEE

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:

301 West Bay Street

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

Jacksonville, FL 32202

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

7/14/2022

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

Kevin L. Baker

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

Vice President and Assistant Secretary

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

**FILING FEE \$35**