## F0700000990

(Requestor's Name)			
(Address)			
(Address)			
(1331533)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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MAR ? 2017 C MCNAHR CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500 The MAR TO SHARE TO CHAIR

ACCOUNT NO. : I2000000195

REFERENCE: 687297 4307993

AUTHORIZATION

COST LIMIT : \$/35.00

COST DIMIT . \$7.35.00 --

ORDER DATE: March 15, 2019

ORDER TIME : 11:42 AM

ORDER NO. : 687297-015

CUSTOMER NO: 4307993

## FOREIGN FILINGS

NAME:

PIERRE FABRE DERMO-COSMETIQUE USA, INC.

<u> </u>	CORPORATE		
	LIMITED	PARTNERSH	[P
	LIMITED	LIABILITY	COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF STATUS

CONTACT PERSON: Emily Croft - EXT# 62925

EXAMINER:

## **COVER LETTER**

TO: Amendment Section	osmetique USA, Inc.
Division of Corporations	The second secon
SUBJECT:Pierre Fabre Dermo-Co	osmetique USA, Inc.
	(Name of Corporation)
DOCUMENT NUMBER: F07000000	0990
The enclosed withdrawal application and	d fee are submitted for filing.
Please return all correspondence concernir matter to the following:	ng this
	(Name of Person)
	(Firm/Company)
	(Address)
((	City/State and Zip code)
For further information concerning this ma	tter, please call:
Thomas Guttridge	at ( 973 ) 355-8040
(Name of Person) Enclosed is a check for the amount:	(Area Code & Daytime Telephone Number)
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & \$52.50 Filing Fee, Certified Copy Certificate of Status & Certified (Additional copy is Enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations	STREET ADDRESS: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL.32314

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

Pierre Fabre Dermo-Cosmetique US	A, Inc.
(Name of Corporation)	
	201 <b>9</b>
F0700000990	
(Document Number of Corporation (	i(known)
	- O
	₩ - <del></del>
New York	**************************************
(Incorporated Under Laws o	D
	ar ar
This corporation is no longer transacting business or conducting at voluntarily surrenders its authority to transact business or conduct a	ffairs in Florida.
This corporation revokes the authority of its registered agent in lappoints the Department of State as its agent for service of proces the time it was authorized to transact business or conduct affairs in	s based on a cause of action arising during
The following is a current mailing address for the corporation:	
8 Campus Drive	
(Mailing Address)	
Parsippany, New Jersey 0705	4
(City/ State /Zip)	
The corporation agrees to notify the Department of State in the future	re of any change in its mailing address.
(Signature of a director president or other officer - if in the bands of a	02/24/19
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(conc)
Mathieu Clement	Vice President
(Typed or printed name of person signing)	(Title of person signing)

FILING FEE \$35