Division of Corporations Electronic Filing Cover Sheet

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DISSOLUTION OR WITHDRAWAL SIG INTER-FINANCE, INC.

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JUN 23 2016

Tallahassee, FL.32314

COVER LETTER

	Amendment Section Division of Corporations		
SUBJEC	CT: SIG INTER-FINAL	NCE, INC.	
	• •	(Name of Corporation)
DOCUN	MENT NUMBER: <u>F07000003415</u>		
The encl	osed withdrawal application and fo	ee are submitted for fili	ng.
	eturn all correspondence concerning to the following:	this	
manor to		Celeste Stellabott	
		(Name of Person)	
	c/	o SIG LLP	
		(Firm/Company)	
	401 E.	City Avenue, Suite 22	0
		(Address)	
	Ва	ala Cynwyd, PA 1900-	4
	· (Ci	ty/State and Zip code)	
For furth	er information concerning this matte	er, please call:	
	Celeste Stellabott	(484) 562-1255
Enclosed	(Name of Person) is a check for the amount:	(Area Code	e & Daytime Telephone Number)
\$35 F	iling Fee \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is Enclosed)	S52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
	MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327		STREET ADDRESS: Amendment Section Division of Corporations 2661 Executive Center Circle

Tallahassee, FL. 32301

SECRETARY OF STATE
DIVISION OF CORPORATION

2016 JUN 22 AM 9: 53

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

SIG INTER-FINANCE, IN	C.
(Name of Corporation)	
F07000003415	
(Document Number of Curporation (if known)
DELAWARE	
(Incorporated Under Laws o	1)
This corporation is no longer transacting business or conducting a voluntarily surrenders its authority to transact business or conduct a	ffairs within the State of Florida and hereby ffairs in Florida.
This corporation revokes the authority of its registered agent in appoints the Department of State as its agent for service of procesthe time it was authorized to transact business or conduct affairs in	ss based on a cause of action arising during
The following is a current mailing address for the corporation:	
555 SOUTH FEDERAL HIGHWAY, SUIT	TE 400
(Mailing Address)	
BOCA RATON, FL 33432	
(City/ State /Zip)	
The corporation agrees to notify the Department of State in the futu	re of any change in its mailing address.
(Signature of a director, president or other officer - if in the hands of a received or other court appointed fiduciary, by that fiduciary)	6-21-16 (Date)
BRIAN SULLIVAN	TREASURER
(Typed or printed name of person signing)	(Title of person signing)

FILING FEE \$35