

F07000005665

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

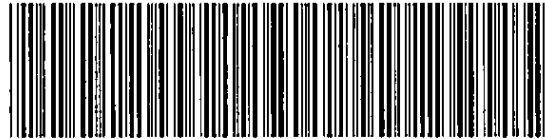
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2022 MAY -6 AM 10:13

FILED

DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

2022 MAY -6 PM 2:11

RECEIVED

With

MAY 16 2022

TERMINAL

**FLORIDA FILING & SEARCH SERVICES, INC.**

**P.O. BOX 10662 TALLAHASSEE, FL 32302**

**155 Office Plaza Dr Ste A Tallahassee FL 32301**

**PHONE: (800) 435-9371; FAX: (866) 860-8395**

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**DATE:** 05/06/22

**NAME:** BONNIER CORPORATION

**TYPE OF FILING:** APPLICATION *for withdrawal*

**COST:** 35.00

**RETURN:** PLAIN COPY PLEASE

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**ACCOUNT:** FCA000000015

**AUTHORIZATION:** ABBIE/PAUL HODGE

*A. Hodge*

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 10, 2022

FLORIDA FILING & SEARCH SERVICES, INC.

SUBJECT: BONNIER CORPORATION  
Ref. Number: F07000005665

RECEIVED  
2022 MAY 12 PM 1:51  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

We have received your document for BONNIER CORPORATION and the authorization to debit your account in the amount of \$35.00. However, the document has not been filed and is being returned for the following:

THE DATE THE DELAWARE CORPORATION WAS AUTHORIZED TO TRANSACT BUSINESS IN THE STATE OF FLORIDA WAS 11/05/2007. PLEASE CORRECT LINE 3 OF THE DOCUMENT WITH THE CORRECT DATE.

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.

Darlene Connell  
Regulatory Specialist II Supervisor

Letter Number: 822A00010708

Please keep original file date  
Thank you!

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Bonnier Corporation

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

**DOCUMENT NUMBER:** F07000005665

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

Please return all correspondence concerning this matter to the following:

Jeremy Thompson

\_\_\_\_\_  
(Name of Person)

Bonnier LLC

\_\_\_\_\_  
(Firm/Company)

515 N. Virginia Avenue

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

Winter Park, FL 32789

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

For further information concerning this matter, please call:

Debbie Paino

at (407) 571-4515

\_\_\_\_\_  
(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**

Bonnier Corporation

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

F07000005665

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

Delaware - 11/15/2007

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

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:


515 N. Virginia Avenue

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

Winter Park, FL 32789

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

Jeremy Thompson

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

5/11/22

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

Secretary

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

**FILING FEE \$35**

FILED  
2022 MAY -6 AM 10:13  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA