F0800000222

_____
(Requestor's Name)

_____
(Address)

_____
(Address)

_____
(City/State/Zip/Phone #)

☐ PICK-UP   ☐ WAIT   ☐ MAIL
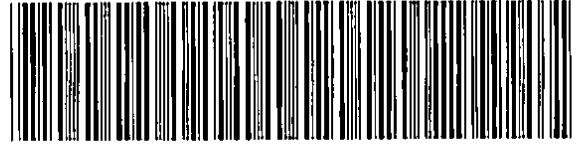
_____
(Business Entity Name)

_____
(Document Number)

Certified Copies _____   Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

500329664545

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

ACCOUNT NO. : I20000000195

REFERENCE : 632409   7765982

AUTHORIZATION :

COST LIMIT : $ 35.00
- -

ORDER DATE : February 13, 2019

ORDER TIME : 9:05 AM

ORDER NO. : 632409-015

CUSTOMER NO: 7765982

- -

FOREIGN FILINGS

NAME: SESAC, 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: Roxanne Turner - EXT#

EXAMINER: _____

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

SESAC, INC.
_____
(Name of Corporation)

F08000000222
_____
(Document Number of Corporation (if known)

New York
_____
(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:

35 Music Square East
_____
(Mailing Address)

Nashville, TN 37203
_____
(City/ State /Zip)

2019 MAY 22 AM 8: 12

The corporation agrees to notify the Department of State in the future of any change in its mailing address.

_____   5|21|19
(Signature of a director, president or other officer - if in the hands of a   (Date)
receiver or other court appointed fiduciary, by that fiduciary)

KELLI TURNER   VICE PRESIDENT
_____   _____
(Typed or printed name of person signing)   (Title of person signing)

FILING FEE $35