

***PLEASE FILE FIRST,
PRIOR TO QUAL. FOR
MEDIFLEET, LLC***

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

***PLEASE FILE FIRST,
PRIOR TO QUAL. FOR
MEDIFLEET, LLC***

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H18000303016 3)))



H180003030163ABCW

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : CAPITOL SERVICES, INC.
Account Number : 120160000017
Phone : (855) 498-5500
Fax Number : (800) 432-3622

**DISSOLUTION OR WITHDRAWAL
MEDIFLEET, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$43.75

***PLEASE FILE FIRST,
PRIOR TO QUAL. FOR
MEDIFLEET, LLC***

***PLEASE FILE FIRST,
PRIOR TO QUAL. FOR
MEDIFLEET, LLC***

*Withdrawal
CC*

RECEIVED

2018 OCT 19 AM 10:59

SECRETARY OF STATE
TALLAHASSEE, FL

Electronic Filing Menu

Corporate Filing Menu

Help

OCT 22 2018
I ALBRITTON

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

Medifleet, Inc.

(Name of Corporation)

F08000004097

(Document Number of Corporation (if known))

Connecticut

(Incorporated Under Laws of)

FILED
2018 OCT 19 PM 12:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:


2251 Lynx Lane, #5

(Mailing Address)

Orlando, FL 32804

(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 point appointed fiduciary, by that fiduciary)

5/1/18

(Date)

David Hunter

(Typed or printed name of person signing)

Chief Financial Officer

(Title of person signing)

FILING FEE \$35