

FO800000 4713

(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



100294826751

FILED

2016 FEB -3 A 11:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED

DEPT. OF REVENUE

17 FEB -3 PM 4:20

TO ASSEMBLY  
SUFFICIENT FOR FILING

T. LEMUEUX

FEB 06 2016

*Handwritten signature*

File 1st  
\* do not separate  
please \*

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

ACCOUNT NO. : I20000000195

REFERENCE : 494766 5123330

AUTHORIZATION :

COST LIMIT : \$35.00

ORDER DATE : February 1, 2017

ORDER TIME : 10:04 AM

ORDER NO. : 494766-205

CUSTOMER NO: 5123330

FOREIGN FILINGS

NAME: CCI CORPORATE SERVICES, 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: Courtney Williams - EXT# 62935

EXAMINER: \_\_\_\_\_

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** CCI Corporate Services, Inc.  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** \_\_\_\_\_

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

Please return all correspondence concerning this  
matter to the following:

Barbara Williamson

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

Cox Enterprises, Inc., Attn: Legal Department

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

6205-A Peachtree Dunwoody Road

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

Atlanta, GA 30328

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

For further information concerning this matter, please call:

Barbara Williamson

at ( 678 )

645-0841

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

\_\_\_\_\_  
(Area Code & Daytime Telephone Number)

Enclosed is a check for the amount:

☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee,  
Certificate of Status Certified Copy Certificate of Status & Certified  
(Additional copy is Enclosed) 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  
2661 Executive Center Circle  
Tallahassee, FL. 32301

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

CCI Corporate Services, Inc.

(Name of Corporation)

(Document Number of Corporation (if known))

Delaware

(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:

6205-A Peachtree Dunwoody Road

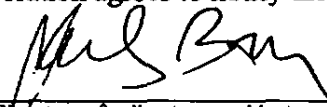
(Mailing Address)

Atlanta, GA 30328

(City/ State /Zip)

FILED  
2016 FEB - 3  
A 11:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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)

Charles N. Bowen

(Typed or printed name of person signing)

1-31-2017

(Date)

Assistant Secretary

(Title of person signing)

**FILING FEE \$35**