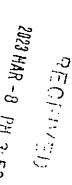
(Requestor's Name)						
(Address)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
J. HORNE						
MAR - 9 2023						

Office Use Only



700403900267







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

		ACCOUNT	NO.	:	1200000	00195	
		REFERI	ENCE	:	420917	8331191	
		AUTHORIZAT	rion	:	1	M.	
		COST L	IMIT	:	\$ 35.00	med de man	ノ
00000					· 	/- }	
ORDER	DATE:	January 30,	2023				
ORDER	TIME :	1:33 PM					
ORDER	NO. :	420917-095					
CUSTON	MER NO:	8331191					
		· 				·	
FOREIGN FILINGS							
	NAME:	P.J. ROBE	3 VARI	ABI	E CORP.		
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							

EXAMINER:

CONTACT PERSON: Eyliena Baker - EXT#

COVER LETTER

	ndment Section sion of Corporations	
SUBJECT:	P.J. Robb Variable Corp.	
SODJECT.		(Name of Corporation)
DOCUMEN	NT NUMBER: F09000002231	
The enclosed	d withdrawal application and fe	ee are submitted for filing.
Please return	all correspondence concerning t	this matter to the following:
		(Name of Person)
		(Firm/Company)
		(Address)
-	(Ci	ty/State and Zip code)
For further i	information concerning this matte	er, please call:
	(Name of Person)	at () (Area Code & Daytime Telephone Number)
Enclosed is	a check for the amount:	
□ \$35 Filin	ng Fee \$\square\$ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee, Certified Copy Certificate of Status & Certified (Additional copy is Enclosed)
Ame Divi P.O.	ing Address: endment Section ision of Corporations . Box 6327 ahassee, 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 WITHDRAWAE OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

P.J. Robb Va	riable Corp.			co
	·	ame of Corporation)		1) Miller 92
F0900000223	31			2
	(Document Nu	mber of Corporation (i	f known)	
Tennessee	06/03/2009			
(Incor	porated Under Laws of and date	authorized to transact	business/conduct its affair	s)
appoints the Departnime it was authorize	vokes the authority of its re- nent of State as its agent for id to transact business or con- urrent mailing address for the	service of process Induct affairs in Flor ne corporation:	pased on a cause of acti	ce on its behalf and on arising during the
c/o Hasana S	tanberry, Truist 214 N Tryon St	(Mailing Address)		
Charlotte, No	C 28202-1078	(City/ State /Zip)	·	
	ees to notify the Department High irector, president or other officer - if irector, appointed fiduciary, by that fiduciary is the		re of any change in its	
Jennifer Hiest	er		Secretary	
(Typed o	or printed name of person signing)	 ,	(Title of perso	on signing)

FILING FEE \$35