

uestor's Name)	
ress)	
ress)	
/State/Zip/Phon	e #)
WAIT	MAIL
iness Entity Nar	me)
ument Number)	
Certificates	s of Status
iling Officer:	
	, .
	ress)  /State/Zip/Phon  WAIT  iness Entity Nai  ument Number)

Office Use Only



700288625337

08/19/16--01042--005\_\*\*35.00

16 AUG 19 PH 1: 40

locusopain

SEP 0 6 2016

D CUSHING

## **COVER LETTER**

TO:	Amendment Section Division of Corporations					
SUBJECT: Quad/Graphics Printing Corp.						
SUBJE		(Name of Corporation)  T NUMBER: F09000002806  withdrawal application and fee are submitted for filing.  all correspondence concerning this following:  dra Charlton, Paralegal  (Name of Person)				
• • •						
The en	closed withdrawal application and	fee are submitted for	or filing.			
	return all correspondence concerning to the following:	; this				
	Sandra Charlton, Paralegal					
		(Name of Person)	1			
	Quad/Graphics, Inc.			SEC SEC	, )	
		(Firm/Company)				
	N61W23044 Harry's Way	(Name of Corporation)  O2806  In and fee are submitted for filing.  (Name of Person)  (Firm/Company)  (Address)  (City/State and Zip code)  is matter, please call:  at (414				
	——————————————————————————————————————	(Address)			January January	
	Sussex, WI 53089-3995	(Name of Corporations)  Quad/Graphics Printing Corp.  (Name of Corporation)  IT NUMBER:  F09000002806  It withdrawal application and fee are submitted for filing.  It all correspondence concerning this following:  Indra Charlton, Paralegal  (Name of Person)  Ad/Graphics, Inc.  (Firm/Company)  (Address)  (Sex., WI 53089-3995  (City/State and Zip code)  Information concerning this matter, please call:  Iton  (Name of Person)  (Area Code & Daytime Telephone Number)  It check for the amount:  Gree \$43.75 Filing Fee & \$43.75 Filing Fee & \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is Enclosed)  MAILING ADDRESS:  Amendment Section  Division of Corporations  P.O. Box 6327  STREET ADDRESS:  Amendment Section  Division of Corporations  P.O. Box 6327	e (u,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	(0	(Name of Corporations)  (Name of Corporation)  NUMBER: F09000002806  NUMBER: F09000002806  NUMBER: F09000002806  NUMBER: F09000002806  NUMBER: F09000002806  Number of Posson of Corporation and fee are submitted for filing.  (Name of Person)  (Raphics, Inc.  (Firm/Company)  23044 Harry's Way  (Address)  x, WI 53089-3995  (City/State and Zip code)  rmation concerning this matter, please call:  (Area Code & Daytime Telephone Number)  neck for the amount:  (Additional copy is Enclosed)  MAILING ADDRESS:  Amendment Section Division of Corporations P.O. Box 6327  2661 Executive Center Circle				
For fur	ther information concerning this mat	ter, please call:				
Sandra	Charlton	414	566-2011			
Enclose	(Name of Person) ed is a check for the amount:		Code & Daytime Telepho	one Number)		
<b>√</b> \$35		Certified Copy (Additional copy	Certificate of St	atus & Certif		
	Amendment Section Division of Corporations P.O. Box 6327		Amendment Section Division of Corpora 2661 Executive Cen	n itions iter Circle		

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

Quad/Graphics Printing Corp.		
(Name of Corporation)	)	
F09000002806		
(Document Number of Corporation	n (if known)	
Delaware		
(Incorporated Under Laws	s of)	
is corporation is no longer transacting business or conducting luntarily surrenders its authority to transact business or conducting the corporation revokes the authority of its registered agent is points the Department of State as its agent for service of proceetime it was authorized to transact business or conduct affairs the following is a current mailing address for the corporation:  N61W23044 Harry's Way  (Mailing Address)	et affairs in Florida.  In Florida to accept service on its becess based on a cause of action arisin in Florida.	ehalf a
Sussex, WI 53089		
(City/ State /Zip)		
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	uture of any change in its mailing add  8/03/2016  (Date)	lress.
John Sloane	Assistant Secretary	
(Typed or printed name of person signing)	(Title of person signing)	