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Withdrawal

JAN 0 7 2021 D CONNELL CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE : 574960 7190256 AUTHORIZATION : , COST LIMIT : \$ '35.00 ORDER DATE: December 16, 2020 ORDER TIME : 1:23 PM ORDER NO. : 574960-050 CUSTOMER NO: 7190256 FOREIGN FILINGS NAME: BRC IMAGINATION ARTS, 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

EXAMINER:

CONTACT PERSON: Eyliena Baker - EXT#



January 4, 2021

RESUBMIT

Please give original submission date as file date.

CSC

SUBJECT: BRC IMAGINATION ARTS, INC.

Ref. Number: F10000000005

We have received your document for BRC IMAGINATION ARTS, INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please provide the date the entity was authorized to transact business in the state of Florida.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Terri J Schroeder Regulatory Specialist III

Letter Number: 221A00000013

COVER LETTER

TO: Amendment Section Division of Corporations							
SUBJECT: BRC IMAGINATION ARTS Inc. (Name of Corporation)							
DOCUMENT NUMBER: <u>F1000000005</u>							
The enclosed withdrawal application and fee are submitted for filing.							
Please return all correspondence concerning this matter to the following:							
Doug Sarver (Name of Person)							
BRC IMAGINATION ARTS, Inc. (Firm/Company)							
2711 WINONA AVE.							
27/1 WINONA AVE. (Address) BURBANK CA 9/50 4 (City/State and Zip code)							
BURBANK CA 91504							
(City/State and Zip code)							
For further information concerning this matter, please call:							
Doug Sarve at (8/8) 84/-8084 (Name of Person) (Area Code & Daytime Telephone Number)							
(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 (Additional copy is Enclosed) □ \$52.50 Filing Fee, Certificate of Status & Certified 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303							

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

BRC Imagination Arts, Inc.

			(Name of Corporation	1)			
F	100000000	05					
_	(Document Number of Corporation (if known)						
C	California	12/31/2009					
_	(Incor	porated Under Laws of a	nd date authorized to trans	sact business/con	duct its affair	rs)	
			business or conducting sact business or conduc			f Florida and her	eby
appoints th	ne Departn	nent of State as its age	f its registered agent i ent for service of proces or conduct affairs in F	ss based on a c			
The follow	/ing is a cu	nrent mailing address	for the corporation:			». B	QÐ
2	711 Winona	ı Avenue				20 06	T
В	Burbank, Ca	lifornia 91504	(Mailing Address)			€ 30 F	
_	• • • • • • • • • • • • • • • • • • • •		(City/ State /Zip)		-	ο ψ 25	☺
The corpor	ration agre	es to notify the Depar	tment of State in the fu	iture of any ch	ange in its r	nailing address.	
(Sign reco	nature of a dis	rector, president or other offic court appointed fiduciary, by	cer - if in the hands of a y that fiduciary)	28	DEC (Date)	2020	-
Rol	bert E. Rogo	ers		President			
	(Typed o	printed name of person sign	img)		(Title of person	n signing)	•

FILING FEE \$35