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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)205-8842 Fax Number : (850)878-5368

DISSOLUTION OR WITHDRAWAL CSL SOUTH, INC.

Certificate of Status	0	
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COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBI	JECT: CSL South, Inc.	
5050		ame of Corporation)
DOC	UMENT NUMBER: F10000000097	·
The e	enclosed withdrawal application and fee	are submitted for filing.
	e return all correspondence concerning this to the following:	3
	Bruce E. Cohen	
	(N	(ame of Person)
	CSL South, Inc.	
	(F	?irm/Company)
	7905 BROWNING ROAD, SUITE 316	
		(Address)
	PENNSAUKEN, NJ 08109 US	
	(City/	State and Zip code)
For fu	urther information concerning this matter,	please call:
		at()
Enclo	(Name of Person) sed is a check for the amount:	(Area Code & Daytime Telephone Number)
]\$ 33	Certificate of Status C	43.75 Filing Fee &\$52.50 Filing Fee, ertified Copy
	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

CSL South, Inc.

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

	(Name of Corporation)	
	F10000000097		
	(Document Number of Corporation	n (if known)	
	•		
	Delaware		
	(Incorporated Under Law	s of)	
	orporation is no longer transacting business or conducting arily surrenders its authority to transact business or conduc		il hereby
appoin	corporation revokes the authority of its registered agent in the Department of State as its agent for service of pro- ne it was authorized to transact business or conduct affairs	cess based on a cause of action arising	
The fo	llowing is a current mailing address for the corporation:		5 APR
	7903 BROWNING ROAD, SUITE 316		
	(Mailing Address)		177
		·	至四
	Pennsauken, nj 08109		۾ ۾
	(City/ State /Zip)		9:41
The co	exporation agrees to notify the Department of State in the fi	sture of any change in its mailing addr	t 83.
	(Signature of a director, president or other officer - If in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	3/3/15 (Date)	
	Bruce E. Cohen	Secretary	
	(Typed or printed name of person signing)	(Title of person signing)	

FILING FEE \$35