9/29/2017



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000256601 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (512)418-6949 Fax Number : (954)208-0845

DISSOLUTION OR WITHDRAWAL MISCO CREDIT, INC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$43.75

Electronic Filing Menu Corporate Filing Menu

Help

CCT 0 2 7017

的 1 医2 性操作



https://efile.sunbiz.org/scripts/efilcovr.exe



1.	

COVER LETTER

TO:	Amendment Section Division of Corporations			
CHIDI	MISCO CREDIT, INC.			
SUBJ	ECT:	(Name of Corpo		
DOC	UMENT NUMBER: F10000003113		<u> </u>	
The c	nclosed withdrawal application and	fee are submitted	for filing	g.
	e return all correspondence concerning r to the following:	g this		
	Carol Anderson			
	<u></u>	(Name of Perso	on)	
	Omni Financial Group			
		(Firm/Compan	y)	
	1 Radisson Plaza, Ste 804,			
		(Address)		
	New Rochelle, NY 10802			
	((City/State and Zip	code)	
For fi	urther information concerning this man	tter, please call:		
Lucy	Roberts	at (965-1	3817
Enclo	(Name of Person) used is a check for the amount:	(Arc	ia Code á	& Daytime Telephone Number)
\$3	5 Filing Fee 543.75 Filing Fee & Certificate of Status	\$43.75 Filing Certified Copy (Additional co Enclosed)	y	\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
	MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassec, FL.32314		A D 20	TREET ADDRESS: mendment Section ivision of Corporations 661 Executive Center Circle allahassec, FL. 32301

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

	(Name of Corporation)	
F10000003313		
	(Document Number of Corporation (if known)	
۷V		

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:

P.O. Box 467 (Alading Addre	85)			
New Rochelle, NY 10892		型台		
(City/ State /Zi	p)	DATE:	43S #	7
corporation agrees to notify the Department of State in the	he future of any chang	e Killin	nalizng :	addres
Separative of a greector, president or other or field - it in the hanes of a	09/22/17	Fig.	<u>></u>	
receiver or other court appointed hidrotary, by that fiduciary)		No.	ار ق	
Marsigliano, Dena	Secretary			
(Typed or printed name of person signing)		la of person	Signary)	

FILING FEE \$35