

F10000003131

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

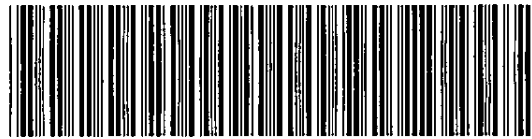
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2014 MAY -9 PM 1:52

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14 MAY -9 AM 10:38

MAY 12 2014
C. CARROTHERS



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 125644 7199649

AUTHORIZATION

COST LIMIT : \$ 43.75

ORDER DATE : May 8, 2014

ORDER TIME : 4:52 PM

ORDER NO. : 125644-005

CUSTOMER NO: 7199649

File First

UC Qual Attached

FOREIGN FILINGS

NAME: COASTCON, INC.

XX CORPORATE
 LIMITED PARTNERSHIP
 LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF STATUS

CONTACT PERSON: Emily Gray - EXT# 52925

EXAMINER: _____

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

COASTCON, INC.

(Name of Corporation)

F10000003131

(Document Number of Corporation (if known))

~~DELAWARE~~ *California*

(Incorporated Under Laws of)

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:

8200 185TH ST #A

(Mailing Address)

Tinley Park, IL 60487

(City/ State /Zip)

The corporation agrees to notify the Department of State in the future of any change in its mailing address.

Joseph Brunetti
(Signature of director, president or other officer - if in the hands of a
receiver or other court appointed fiduciary, by that fiduciary)

Joseph Brunetti

(Typed or printed name of person signing)

5/6/14
(Date)

Manager

CFU

(Title of person signing)

FILING FEE \$35

FILED
14 MAY -9 AM 10:39
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