

F10000004310

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

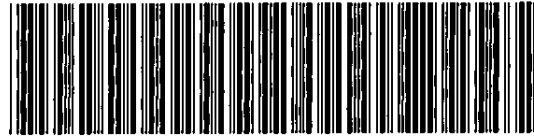
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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V HERRING  
APR 27 2017

Account#: 120000000088

Date: 04/26/2017

Name: Marisa Kugelmann

Reference #: D300959

ENTITY NAME: NORTH AMERICAN GREEN, INC.

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Annual Report

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

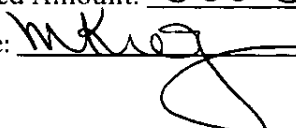
☒ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other: \_\_\_\_\_

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Authorized Amount: \$35.00

Signature: 

Account#: I20000000088

Date: 04/26/2017

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- ☐ Fictitious Name
- ☐ Other: \_\_\_\_\_

Authorized Amount: \_\_\_\_\_

Signature: \_\_\_\_\_

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

**North American Green, Inc.**

(Name of Corporation)

**F10000004310**

(Document Number of Corporation (if known))

**Indiana**

(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:

**2500 Northwinds Parkway, Suite 500**


(Mailing Address)

**Alpharetta, Georgia 30009**

(City/ State /Zip)

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

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

**April 26, 2017**

(Date)

**Robert F. Briggs**

(Typed or printed name of person signing)

**Secretary**

(Title of person signing)

**FILING FEE \$35**