(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I20000000195 REFERENCE : WD-8681 AUTHORIZATION : STANDER TO SEE THE SEE TO SEE THE SEE TO SEE THE SEE TO SEE THE SEE TO
ORDER DATE : 09/17/2024
ORDER TIME :
ORDER NO. :
CUSTOMER NO:
FOREIGN FILINGS NAME: CURRICULUM ADVANTAGE, INC.
CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY
XXXX WITHDRAWAL/CANCELLATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF STATUS
CONTACT PERSON:

EXAMINER:

COVER LETTER

10:	Division of Corporations
SUBJ	Curriculum Advantage, Inc.
SUDJ	(Name of Corporation)
DOCU	JMENT NUMBER: F11000003971
The en	closed withdrawal application and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Lindsey L. COok
	(Name of Person)
	Curriculum Advantage, Inc.
	(Firm/Company)
	PO Box 3243
	(Address)
	Duluth, GA 30096
	(City/State and Zip code)
For tu	ther information concerning this matter, please call:
Lindse	L. Cook 678 618-1275
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclos	ed is a check for the amount:
■ \$35	Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified (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

Curriculum Advantage, Inc.

	(Name of Corporation)	,
	F11000003971	
	(Document Number of Corporation	n (if known)
		THE STATE OF THE S
	DE - 4/1/2004	STP T
	(Incorporated Under Laws of and date authorized to transa	act business/conduct its affairs)
	rporation is no longer transacting business or conducting rily surrenders its authority to transact business or conduct	affairs within the State of Florida and her
points	rporation revokes the authority of its registered agent in the Department of State as its agent for service of proces was authorized to transact business or conduct affairs in Fl	s based on a cause of action arising during
ne folk	owing is a current mailing address for the corporation:	
	PO Box 3243	
	PO Box 3243 (Mailing Address)	
	(Mailing Address)	
•	Ouluth, GA 30096 (City/ State /Zip) Doration agrees to notify the Department of State in the fur	ture of any change in its mailing address. 09/04/2024 (Date)
Ö	Duluth, GA 30096 (City/ State /Zip)	09/04/2024

FILING FEE \$35