## F12000000755

| (Requestor's Name)                      |  |  |  |
|---|--|--|--|
| (Address)                               |  |  |  |
| (Address)                               |  |  |  |
| (City/State/Zip/Phone #)                |  |  |  |
| PICK-UP WAIT MAIL                       |  |  |  |
| (Business Entity Name)                  |  |  |  |
| (Document Number)                       |  |  |  |
| Certified Copies Certificates of Status |  |  |  |
| Special Instructions to Filing Officer: |  |  |  |
| File                                    |  |  |  |

Office Use Only



900271334139



RECEIVED
15 APR-9 PH 4: 24
NVISION OF CORPORATIONS

Withdrawal

04 - 10 - 15

DC

file first du not separate pleasex

| ACCOUNT NO. :  | 1200000001   | 95      |  |  |
|--|--------------|---------|--|--|
| REFERENCE :  | 583311       | 7193709 |  |  |
| AUTHORIZATION :  | Locale &     | ena     |  |  |
| COST LIMIT :   | \$ 35.00     |         |  |  |
| ORDER DATE : April 9, 2015                                 |              |         |  |  |
| ORDER TIME : 2:38 PM                                       |              |         |  |  |
| ORDER NO. : 583311-020                                     |              |         |  |  |
| CUSTOMER NO: 7193709                                       |              |         |  |  |
|  |              |         |  |  |
| FOREIGN FILI   | NGS          |         |  |  |
| NAME: ID ANALYTICS, IN                                     | C.           |         |  |  |
| XX CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY |              |         |  |  |
| XXXX WITHDRAWAL/CANCELLATION                               |              |         |  |  |
| PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:            |              |         |  |  |
| CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF STATUS |              |         |  |  |
| CONTACT PERSON: Courtney William                           | s - EXT# 629 | 935     |  |  |
|  | EXAMINER:    |         |  |  |
|  |              |         |  |  |

## **COVER LETTER**

| TO:           | Amendment Section Division of Corporations  |                          |  |
|---------------|---|--------------------------|--|
| SUBJ          | TECT: ID Analytics, Inc.  |                          |  |
|               |   | (Name of Corporat        | ion)   |
| рос           | UMENT NUMBER: F12000000755  | <u> </u>                 |  |
| The c         | nclosed withdrawal application ar   | nd fee are submitted for | filing.  |
|               | e return all correspondence concern<br>to the following:  | ing this                 |  |
|               | Joni Harder   |                          |  |
|               |   | (Name of Person)         |  |
|               | ID Analytics, Inc.  |                          |  |
|               |   | (Firm/Company)           |  |
|               | c/o Greenberg Traurig, LLP 2375 E C   | amelback Road, Suite 700 |  |
|               |   | (Address)                |  |
|               | Phoenix, AZ 85016   |                          |  |
|               |   | (City/State and Zip cod  | de)  |
| For fu        | rther information concerning this m   | atter, please call:      |  |
| Joni Ha       | arder   | at ( 602                 | 445-8574   |
| Enclos        | (Name of Person)<br>sed is a check for the amount:  | (Area C                  | ode & Daytime Telephone Number)  |
| <b>∑</b> \$35 | Filing Fee \$43.75 Filing Fee & Certificate of Status   |                          | Certificate of Status & Certified  |
|               | MAILING ADDRESS:<br>Amendment Section<br>Division of Corporations<br>P.O. Box 6327<br>Tallahassee, FL.32314 |                          | STREET ADDRESS: Amendment Section Division of Corporations 2661 Executive Center Circle Tallahassee, FL. 32301 |

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

ID Analytics, Inc.

| F12000000755   |  |  |  |
|--|--|--|--|
| (Document Number of Corporation (if kno  | own)   |  |  |
| Delaware   |  |  |  |
| (Incorporated Under Laws of)   |  |  |  |
| This corporation is no longer transacting business or conducting affairs voluntarily surrenders its authority to transact business or conduct affair.  |  |  |  |
| This corporation revokes the authority of its registered agent in Floriappoints the Department of State as its agent for service of process bas the time it was authorized to transact business or conduct affairs in Floria | sed on a cause of action arising during        |  |  |
| The following is a current mailing address for the corporation:  |  |  |  |
| c/o ID Analytics, LLC 15253 Avenue of Science  | 5 F  |  |  |
| (Maning Address)   |  |  |  |
| San Diego, CA 92128  | R-9 AHIO: 21                                   |  |  |
| (City/ State /Zip)   | 10: 24<br>10: 24                               |  |  |
| The corporation agrees to notify the Department of State in the future of  | any change in its mailing address.  04/09/2015 |  |  |
| (Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)  | (Date)   |  |  |
| Chris Power Exe  | ecutive Vice President                         |  |  |
| (Typed or printed name of person signing)  | (Title of person signing)                      |  |  |

FILING FEE \$35