3/31/2020

Division of Corporations ORIGINAL SUBMISSION DATE OF 03/31/2020

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-0821 : (850)558-1515 Fax Number

DISSOLUTION OR WITHDRAWAL ENSERVIO, INC.

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COVER LETTER

	Amendment Section Division of Corporations		
SUBJEC	T: Enservio, Inc.		
(3 () () ()	p° E 3	(Name of Corporation)	
DOCUM	1ENT NUMBER:F12000001008		
The encl	osed withdrawal application and t	fee are submitted for filin	g.
Please re	turn all correspondence concerning	this matter to the follow	ing:
	Tax Department		
		(Name of Person)	
	Enservio, Inc.		
		(Firm/Company)	
	1301 Solana Blvd., Ste. 2100		
		(Address)	
	Westlake, TX 76262		
	(0	City/State and Zip code)	
For furt	ner information concerning this mat	ter, please call;	
Kristen H	lolash	st (817) 961-	2083 & Daytime Telephone Number)
	(Name of Person)	(Area Code	& Daytime Telephone Number)
Enclose	d is a check for the amount:		
≝ \$3 5 }	Filing Fee		Certificate of Status & Certified
! !	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 l'allahassec, FL 32314	Street Address: Amendment Sec Division of Corp The Centre of T 2415 N. Monroo Tallahassee, FL	porations allahassee 2 Street, Suite 810

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

ENSERVIO	INC.					
	(Name of	Corporation)			·····	
F12 000 9016	908					
than many and the state of the	(Document Number of Corporation (if known)					
Delaware	03/06/2012					
(Incor	porated Under Laws of and date autho	rized to wansact bu	siness/conduct its af	lairs)	•	
oluntarily surrender This corporation reappoints the Departr	no longer transacting business or its authority to transact busines wokes the authority of its registement of State as its agent for services.	s or conduct affa red agent in Flo ce of process bas	irs in Florida. orida to accept selection a cause of a	rvice on	its <u>-b</u> ch in g d u	alf and
	ed to transact business or conduct		1.	• •	MAR (
The following is a co	arrent mailing address for the corp	xeration:			$\frac{\omega}{-}$;
1301 Solana	Blvd., Ste. 2100				AM ID: I	, * . 18890 *
Westlake, T	•	ng Address)): I 2	**************************************
***************************************	(City/	State /Zip)				
The corporation age	ees to notify the Department of St	ate in the foture	of any change in i	ts mailinį	g addre	ess.
	incutor, president or other officer - if in the har rount appointed fiduciary, by that fiduciary		3/2/2. (Da	č		
(Signature of a d receiver or othe	incutor, president of other officer - If in the har r court appointed fiduciary, by that fiduciary)	nds of a	(D _b	te)		
Hector Ruiz			Vice President of Ta	×		
(Typed)	or printed name of person signing)	,	(File of po	rson signist	3)	********

FILING FEE \$35