F12000003235

| uestor's Name) | | | | |
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| ress) | | | | |
| /State/Zip/Phone | e #) | | | |
| ☐ WAIT | MAIL | | | |
| iness Entity Nan | ne) | | | |
| (Document Number) | | | | |
| Certificates | s of Status | | | |
| Filing Officer: | - | | | |
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| | ress) /State/Zip/Phone WAIT siness Entity Nan cument Number) | | | |

Office Use Only



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COVER LETTER

| TO: | Amendment Section Division of Corporations | | | |
|--------|--|---------------|-------------------|---|
| | · | | | |
| SUBJ | ECT: Tritium Card Services, Inc. | (Name of | Corporatio | n) |
| | | (Name of | Corporatio | 11) |
| DOC | UMENT NUMBER: F1200003235 | | | |
| The e | nclosed withdrawal application and f | fee are subr | nitted for f | iling. |
| | return all correspondence concerning to the following: | this | | |
| | Vincenzo Iacono | | | |
| | | (Name of | Person) | |
| | Tritium Card Services, Inc. | | | |
| | | (Firm/Co | mpany) | |
| | 999 Vanderbilt Beach Road, Suite 603 | | | |
| | | (Addr | ess) | |
| | Naples, FL 34108 | | | |
| | (C | ity/State an | d Zip code |) |
| For fu | rther information concerning this matt | ter, please c | :all: | |
| Vincer | zo lacono | at (| 239 | 49-6596 |
| Enclo | (Name of Person) sed is a check for the amount: | | (Area Coo | de & Daytime Telephone Number) |
| \$3: | 5 Filing Fee \$\int \\$43.75 Filing Fee & \bigsec \text{Certificate of Status} | Certified | Copy onal copy is | Certificate of Status & Certified |
| | MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 | | | STREET ADDRESS: Amendment Section Division of Corporations 2661 Executive Center Circle |

Tallahassee, FL. 32301

FL032 - 05/16/2013 Williers Kluwer Online

Tallahassee, FL.32314

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

Tritium Card Services, Inc.

| | (Name of Corporation) | | |
|---------------|--|---|----------------|
| | | | |
| Fl | 1200003235 | | |
| _ | (Document Number of Corporation (| if known) | |
| | | | |
| N' | Υ | | |
| | (Incorporated Under Laws o | of) | |
| | | | |
| • | ration is no longer transacting business or conducting a | | hereby |
| voluntarily: | surrenders its authority to transact business or conduct a | affairs in Florida. | |
| This comor | ration revokes the authority of its registered agent in | Florida to accept service on its beha | lf and |
| | e Department of State as its agent for service of process | | |
| the time it v | was authorized to transact business or conduct affairs in | Florida. | > |
| The fellowi | ing is a current mailing address for the corporation: | | 3 1 |
| THE IOHOWI | ing is a current maining address for the corporation. | | . i |
| 33 | 375 Park Avenue, Suite 4000 | | TLED |
| | (Mailing Address) | | ر الماسير د |
| | | K. | |
| W | /antagh, NY 11793 | | |
| | (City/ State /Zip) | | |
| | | | |
| 771 | | | |
| The corpora | ation agrees to notify the Department of State in the futu | ire of any change in its mailing addres | SS. |
| | V.Y.XX | 9/17/12 | |
| (Sign | nature of a director, president or other officer - if in the hands of a eiver or other court appointed fiduciary, by that fiduciary) | (Date) | |
| rece | eiver or other court appointed fiduciary, by that fiduciary) | | |
| | | President/Secretary | |
| Vine | (Transfer printed name of newer clouds) | · | |
| | (Typed or printed name of person signing) | (Title of person signing) | |

FILING FEE \$35