F12000004975

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



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A. RAMSEY

CT CORP

(850) 656-4724 3458 lakesore Drive Tallahassee, FL 32312

11/04/2024

| Date: | ite: | 11/04/2024 | 4:1 DW | |
|--|-------------------------------|---|---|--|
| | | Acc#I20160000072 | | |
| Name: | TRI SRSB, I | INC. | | |
| Document #: | | ·- | | |
| Order #: | 15949148 | | | |
| Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of | | | | |
| Apostille/Notarial Certification: | | Country of Destination: Number of Certs: | | |
| Filing: | Certified: Plain: COGS: | ✓ | Email Address for Annual Report Notifications | |
| Availability Document Examiner Updater Verifier W.P. Verifier Ref# | Amount: \$ | 35.00 | | |

Thank you!

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

| Tri SRSB, Inc. | |
|--|--|
| (Name of Corp | oration) |
| F12000004975 | 10000000000000000000000000000000000000 |
| (Document Number of Cor | poration (if known) |
| New Jersey, 10/31/2012 | |
| (Incorporated Under Laws of and date authorized | to transact business/conduct its affairs) |
| This corporation is no longer transacting business or cond- voluntarily surrenders its authority to transact business or co- This corporation revokes the authority of its registered a appoints the Department of State as its agent for service of time it was authorized to transact business or conduct affair. The following is a current mailing address for the corporation of | conduct affairs in Florida. Igent in Florida to accept service on its behalf and process based on a cause of action arising during the rs in Florida. |
| (Mailing Add | dress) |
| Conshohocken, PA 19428 | |
| (City/ State | /Zip) |
| The corporation agrees to notify the Department of State in Javier Quinous | the future of any change in its mailing address. |
| (Signature of a director, president or other officer - if in the hands of receiver or other court appointed fiduciary, by that fiduciary) | a (Date) |
| Javier Quinones | President |
| (Typed or printed name of person signing) | (Title of person signing) |

FILING FEE \$35