F13000003952

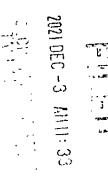
(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
Q. SILAS		
اعري <u>(۲</u>) ويدا		

Office Use Only



200376731242

12/03/21--01023--007 **52.50



COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Banyan Lodge Limited, Inc.	
SUBJECT:	(Name of Corporation)
DOCUMENT NUMBER: F130000039	252
The enclosed withdrawal application a	and fee are submitted for filing.
Please return all correspondence concer	ning this matter to the following:
Raymond G. Robison	
	(Name of Person)
Fox McCluskey Bush Robison, PLL	C
	(Firm/Company)
3461 SE Willoughby Blvd.	
	(Address)
Stuart, FL 34994	
	(City/State and Zip code)
For further information concerning this	matter, please call:
Raymond G. Robison	at (287-4444
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the amount:	
□ \$35 Filing Fee □ \$43.75 Filing Fee Certificate of Sta	c & \$\Bigcup \text{\$\frac{1}{3}\} \$\frac
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

FILED

2021 DEC -3 Aiill: 33

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

Banyan Lodge L	imited, Inc.	
	(Name of Corporation	on)
F13000003952		
<u></u>	(Document Number of Corporate	ion (if known)
Turks and Caico	s / C	
(Incorpora	ated Under Laws of and date authorized to trai	nsact business/conduct its affairs)
	onger transacting business or conducting authority to transact business or conducting	ng affairs within the State of Florida and hereby act affairs in Florida.
appoints the Departmen	es the authority of its registered agent t of State as its agent for service of proc transact business or conduct affairs in	in Florida to accept service on its behalf and ess based on a cause of action arising during the Florida.
The following is a curre	nt mailing address for the corporation:	
-801-S. Ocean Dr	ive, #1001 45 Fin work / (Mailing Address)	ANDING De
•	(Mailing Address)	
Fort Pierce, FL.	SHELADN, SO (City/ State /Zip)	L 29941
	(City/ State /Zip)	
The corporation agrees	to notify the Department of State in the	future of any change in its mailing address.
1	Alle	/ / / 人 ()
(Signature of a director receiver or other cou	or, president or other officer - if in the hands of a art appointed fiduciary, by that fiduciary)	(Date)
Graham Stikelethe	भ	President
(Typed or pri	inted name of person signing)	(Title of person signing)

FILING FEE \$35