

F140000000611

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

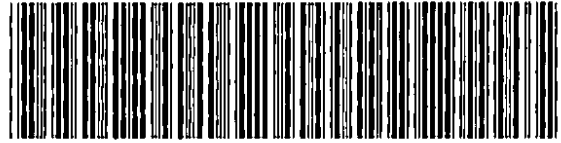
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

12/21/20

Office Use Only



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Withdrawal

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**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

PICK UP: 12/18 Glinda

- ☐ **CERTIFIED COPY** _____
- XX** **PHOTOCOPY** _____
- ☐ **CUS** _____
- XX** **FILING** **WITHDRAWAL** _____

1. **POINTER TELOCATION INC.**
(CORPORATE NAME AND DOCUMENT #)
2. _____
(CORPORATE NAME AND DOCUMENT #)
3. _____
(CORPORATE NAME AND DOCUMENT #)
4. _____
(CORPORATE NAME AND DOCUMENT #)
5. _____
(CORPORATE NAME AND DOCUMENT #)
6. _____
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 21, 2020

CORPORATE ACCESS

SUBJECT: POINTER TELOCATION INC.
Ref. Number: F14000000611

We have received your document for POINTER TELOCATION INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the date the entity was authorized to transact business in Florida.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Terri J Schroeder
Regulatory Specialist III

Letter Number: 620A00025768

Corrected
* Please file
1st date
Rejected

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: POINTER TELOCATION INC.
(Name of Corporation)

DOCUMENT NUMBER: F14000000611

The enclosed **withdrawal application** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Louis J. Marasco, Jr.

(Name of Person)

c/o Olshan Frome Wolosky LLP

(Firm/Company)

1325 Avenue of the Americas, 15th Floor

(Address)

New York, NY 10019

(City/State and Zip code)

For further information concerning this matter, please call:

Louis J. Marasco, Jr. at (212) 451-2340

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the amount:

- ☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is Enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

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

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

POINTER TELOCATION INC.

(Name of Corporation)

F14000000611

(Document Number of Corporation (if known))

DELAWARE

2/11/2014

(Incorporated Under Laws of and date authorized to transact business conduct its affairs)

This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.

This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.

The following is a current mailing address for the corporation:

c/o PowerFleet, Inc., 123 Tice Boulevard

(Mailing Address)

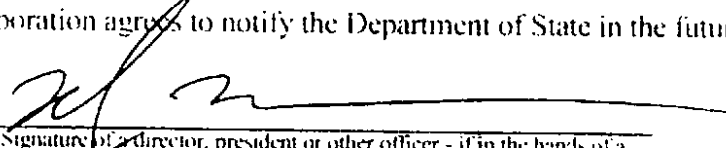
Woodcliff Lake, New Jersey 07677

(City/ State /Zip)

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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The corporation agrees to notify the Department of State in the future of any change in its mailing address.


(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

December 11, 2020

(Date)

Ned Mavrommatis

(Typed or printed name of person signing)

Chief Financial Officer

(Title of person signing)

FILING FEE \$35