F14000002707

(Re	questor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: DISSOLUTION
(Name of Corporation)
DOCUMENT NUMBER: SCHOLTE HOLDING B.V., INC.
The enclosed withdrawal application and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
VLASH THEOHARI
(Name of Person)
EZ BOOKS & TAX LLC
(Firm/Company)
2785 WRIGHTS RD STE 1109
(Address)
OVIEDO, FL 32765-5413
(City/State and Zip code)
For further information concerning this matter, please call:
VLASH THEOHARI at (407)801-8955
(Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the amount:
S35 Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee. Certificate of Status Certified Copy Certificate of Status & Certified (Additional copy is Enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 STREET ADDRESS: Amendment Section Division of Corporations 2661 Executive Center Circle

Tallahassee, FL.32314

Tallahassee, FL. 32301

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

SCHOLTE HOLDING B.V., INC.	
(Name of Corporation)	· · · · · · · · · · · · · · · · · · ·
F14000002707	
(Document Number of Corporation (if kr	own)
NETHERLANDS	
(Incorporated Under Laws of)	
This corporation is no longer transacting business or conducting affair voluntarily surrenders its authority to transact business or conduct affair	
This corporation revokes the authority of its registered agent in Florappoints the Department of State as its agent for service of process be the time it was authorized to transact business or conduct affairs in Florappoints.	ased on a cause of action arising during
The following is a current mailing address for the corporation:	
2785 WRIGHTS RD STE 1109	
(Mailing Address)	222
OVIEDO, FL 32765-5413	, ,
(City/ State /Zip)	.Ω.
The corporation agrees to notify the Department of State in the future of	of any change in its mailing address.
χ/μ	10-40.114
(Signature of director, president or other officer - if in the hands of a receiver of other court appointed fiduciary, by that fiduciary)	(Date)
(Typed or printed name of person signing)	(Title of person signing)