

F14000004330

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Withdrawal

2023 MAR 20 AM 8:55
CLERK OF STATE
TAMM HOSPITAL

FILED

A. RAMSEY
MAR 30 2023

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724

DATE 03/20/2023

****WALK IN****

ENTITY NAME INOVITY, INC

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

XXXXXXXX

Plain Copy

Certified Copy

Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments

Certified Copy of Arts & Amendments Complete File (Including Annual Reports)

Certificate of Status

Certificate of Status Reflecting: _____

****APOSTILLE' / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$ 35.00

ACCOUNT # 120160000072

W: 12/11

Please call Tina at the above number for any issues or concerns. Thank you so much!

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

INOVITY, INC.

(Name of Corporation)

F14000004330

(Document Number of Corporation (if known))

Georgia 10/13/2014

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

2023 MAR 20 AM 8:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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:

2555 MARCONI DR, STE 100

(Mailing Address)

ALPHARETTA, GA 30005

(City/ State /Zip)

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

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

03/23/23

(Date)

April Edwards

(Typed or printed name of person signing)

Controller

(Title of person signing)

FILING FEE \$35