# F14000004877

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Withdrawal



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## **CT CORP**

#### (850) 656-4724 3558 lakesore Drive Tallahassee, FL 32312

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D	ate:	12/07/2023	- w: DW
		Acc#I20160000072	
Name:	Ravago LM	ΓUSA, Inc.	·
Document #:	ĺ		
Order #:	15253106 - 1	1	
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing:			
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Thank you!

### **COVER LETTER**

10:	Amendment Section Division of Corporations				
SUBJ	Ravago LMT USA, Inc.				
3000		(Name of Corporation)			
DOC	UMENT NUMBER:F14000004877	<del></del>			
The er	nclosed withdrawal application and	d fee are submitted for filing.			
Please	return all correspondence concernit	ng this matter to the following:			
	Kathrine LeBlanc				
		(Name of Person)			
	Burns & Levinson LLP				
(Firm/Company)					
	125 High St				
(Address)					
	Boston, MA 02110				
	(	City/State and Zip code)			
For fu	rther information concerning this ma	atter, please call:			
	ne LeBlanc	at ( ) 345.3000			
	(Name of Person)	(Area Code & Daytime Telephone Number)			
Enclos	sed is a check for the amount:				
□ \$3 <i>5</i>	5 Filing Fee	• • • • • • • • • • • • • • • • • • •			
	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

Ravago LMT USA, Inc.	
(Name of Corporation	)
F14000004877	
(Document Number of Corporation	n (if known)
Delaware 11/14/2014	9
(Incorporated Under Laws of and date authorized to trans	act business/conduct its affairs)
appoints the Department of State as its agent for service of procestime it was authorized to transact business or conduct affairs in Fi  The following is a current mailing address for the corporation:  1900 Summit Tower Blvd., Suite 900	
(Mailing Address)	
Orlando, FL 32810	
(City/ State /Zip)	
The corporation agrees to notify the Department of State in the full state of State of State in the full state of State	nture of any change in its mailing address.
(Signature of a director, president of other officer - it in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)
Jeffrey Bittenbinder	CFO
(Typed or printed name of person signing)	(Title of person signing)

FILING FEE \$35