F15000000 846

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(City/State/Zip/Phone #)		
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COVER LETTER

TO:	Amendment Section Division of Corporations			
SURI	Receivables Management of SC Corp.			
50150	(Name of Corporation)			
DOC	UMENT NUMBER:			
The e	nclosed withdrawal application and fee are submitted for filing.			
	e return all correspondence concerning this r to the following:			
	Chris Ray			
	(Name of Person)			
	Receivables Management of SC Corp.			
(Firm/Company)				
	1601 Shop Road, Suite D			
	(Address)			
	1601 Shop Road, Suite D			
	(City/State and Zip code)			
For fu	urther information concerning this matter, please call:			
Chris	Ray 803 776-2030 at (
Enclo	(Name of Person) (Area Code & Daytime Telephone Number) seed is a check for the amount:			
\$3:	5 Filing Fee \$\frac{1}{2}\$43.75 Filing Fee & \$\frac{1}{2}\$\$43.75 Filing Fee & \$\frac{1}{2}\$\$\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is Enclosed) Copy (Additional copy is enclosed)			
	MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of Corporations			

P.O. Box 6327

Tallahassee, FL.32314

Tallahassee, FL. 32301

2661 Executive Center Circle

Receivables Management of SC Corp.

1601 Shop Road, Suite D Columbia, SC 29201-4855

State of Florida FL Reg Section Division of Corporations 2661 Executive Center Circle Clifton Building Tallahassee, FL 32301

RE: Receivables Management of SC Corp. #F15000000846

To Whom It May Concern:

Enclosed you will find our completed application for withdraw.

Please mail all correspondence to:

Christopher Ray Receivables Management of SC Corp. PO Box 50685 Columbia, SC 29250-0685

If you have any questions regarding this application, please contact:

Christopher Ray Receivables Management of SC Corp.

Phone: (803) 776-2030 Fax: (803) 776-9088

Email: chrisray@rmccollect.com

Enclosures

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

Receivables Management of SC Corp.	
(Name	of Corporation)
F.47000000 40	r of Corporation (if known) ted Under Laws of)
F15000000846	C 2
(Document Numbe	r of Corporation (if known)
South Carolina	
(Incorpora	ted Under Laws of)
voluntarily surrenders its authority to transact busine. This corporation revokes the authority of its regis	tered agent in Florida to accept service on its behalf and ervice of process based on a cause of action arising during
The following is a current mailing address for the co	orporation:
PO 8ox 50685	
(Mail	ling Address)
Columbia, SC 29250	
(City	// State /Zip)
The corporation agrees to notify the Department of S	State in the future of any change in its mailing address.
Mu Vay	12/16/15
(Signature of a director, president or other officer - if in the receiver or other court appointed fiduciary, by that fiduciary	hands of a (Date) ary)
Chris Ray	President
(Typed or printed name of person signing)	(Title of person signing)