F15 000001691

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	· .
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	1
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: MUSHKIN MC	
(Name of	Corporation)
DOCUMENT NUMBER: F1500000	1691
The enclosed withdrawal application and fee are sub-	mitted for filing.
Please return all correspondence concerning this matter	er to the following:
	f Person)
- Musting	ompany)
14 Inveneus Dr. (Add	= # F-100
ENGLEWOOD CO	80112
(City/State a	and Zip code)
For further information concerning this matter, please	
SUSAN FALL atc	(Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the amount:	
Certificate of Status Certificate of Status Certificate of Status Certificate of Status (Additional Enclose)	d Copy Certificate of Status & Certified Copy is Copy (Additional copy is enclosed)
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section A Division of Corporations Division of Corporations Division of Corporations 2	treet Address: Amendment Section Division of Corporations The Centre of Tallahassee 415 N. Monroe Street, Suite 810 Tallahassee FL 32303



August 26, 2022

SUSAN FALK 14 INVERNESS DRIVE E SUITE F-100 ENGLEWOOD, CO 80112

SUBJECT: MUSHKIN INC. Ref. Number: F15000001691

We have received your document for MUSHKIN 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):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

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.

Letter Number: 022A00019027

Claretha Golden Regulatory Specialist II

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

(Name of Corporation)
(Document Number of Corporation (if known)
(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:
Evg kubod (O Soliz . 2) Evg kubod (City/ State /Zip)
Evg kubod (O Soliz . 5)
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) (Date)
SUSAN E Falk Vice President

FILING FEE \$35