## F15000001941

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
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C. CARROT, ERS

## **COVER LETTER**

TO: Amendment Section Division of Corporations			
SUBJECT: ZIRX Consumer Services, Inc. (Name of Corporation)			
T4 T000004044			
DOCUMENT NUMBER: F1500000			
The enclosed withdrawal application and fee	are submitted for filing.		
Please return all correspondence concerning thi matter to the following:	s		
Alex Mascarenhas			
(Name of Person)			
ZIRX Technologies, Inc.			
(Firm/Company)			
600 Harrison Street, Suite 120			
(Address)			
San Francisco, CA 94107			
(City/State and Zip code)			
For further information concerning this matter	wleege cells		
For further information concerning this matter, please call:  Alex Macarenhas800 .977-9479			
(Name of Person)	at (800 )977-9479 (Area Code & Daytime Telephone Number)		
Enclosed is a check for the amount:	(Area Code & Daytille Telephone Number)		
(	\$43.75 Filing Fee & \$\sum_{\text{\$52.50}}\$ Filing Fee,  Certified Copy Certificate of Status & Certified  (Additional copy is Enclosed)  Copy (Additional copy is enclosed)		
MAILING ADDRESS:	STREET ADDRESS:		
Amendment Section Division of Corporations	Amendment Section Division of Corporations		
P.O. Box 6327	2661 Executive Center Circle		

Tallahassee, FL. 32301

Tallahassee, FL.32314

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

ZIRX Consumer Services, Inc	1
(Name of Corporation)	•
F15000001941	
(Document Number of Corporation	(if known)
California	
(Incorporated Under Laws	of)
This corporation is no longer transacting business or conducting a coluntarily surrenders its authority to transact business or conduct. This corporation revokes the authority of its registered agent in	affairs in Florida.
appoints the Department of State as its agent for service of proceed the time it was authorized to transact business or conduct affairs in	ess based on a cause of action arising during
The following is a current mailing address for the corporation:	STATE OF THE STATE
600 Harrison Street, Suite 120	
(Mailing Address)	
San Francisco, CA 94107	
(City/ State /Zip)	and the state of t
The corporation agrees to notify the Department of State in the fut	ure of any change in its mailing address.
	9/15/16
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)
Samuel Fishman	Vice President
(Typed or printed name of person signing)	(Title of person signing)
EILING EEE 025	

FILING FEE \$35