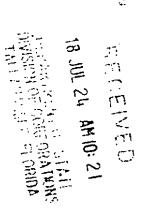
F15000000076

(Requ	uestor's Name)	
(Addr	ess)	
(Addr	ess)	
(City/	State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nam	e)
(Docu	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fi	Iing Officer:	





300316080343



JUL 2 5 2013

CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

•

	ACCOUNT NO.	:	120000000	195
	REFERENCE	:	316937	7968686
	AUTHORIZATION	:	Squelle	e tale
	COST LIMIT	: -	\$ 35-00	
ORDER DATE :	July 24, 2018			
ORDER TIME :	9:34 AM			
ORDER NO. :	316937-005			
CUSTOMER NO:	7968686			

FOREIGN FILINGS

XX	CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY
<u>XXXX</u>	WITHDRAWAL/CANCELLATION

NAME: HSE SYSTEMS, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF STATUS

CONTACT PERSON: Roxanne Turner - EXT#

EXAMINER:

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: HSE SYSTEMS,	INC.	
	(Name of Corporation	1)
DOCUMENT NUMBER: F150000		•
DOCUMENT NUMBER:		
The enclosed withdrawal application and for	ce are submitted for fi	ling.
Please return all correspondence concerning matter to the following:	this	
	(Name of Person)	
	(Firm/Company)	
	(Address)	
(Ci	ty/State and Zip code	•
For further information concerning this matte	er, please call:	
	at ()_	e & Daytime Telephone Number)
(Name of Person) Enclosed is a check for the amount:	(Area Coo	e & Daytime Telephone Number)
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is Enclosed)	\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL.32314		STREET ADDRESS: Amendment Section Division of Corporations 2661 Executive Center Circle Tallahassee, FL. 32301

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

HSE SYSTEMS, INC.
(Name of Corporation)
F15000002076
(Document Number of Corporation (if known)
OHIO
(Incorporated Under Laws of)
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:
545 WASHINGTON BOULEVARD-21ST FLOOR
(Mailing Address)
JERSEY CITY, NJ 07310
(City/ State /Zip)
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)
Kennath E. Thompson (Typed or printed name of person signing) (Title of person signing)

FILING FEE S35

COVER LETTER

	Amendment Section Division of Corporations		
SUBJE	CT: HSE SYSTEMS	, INC.	
		(Name of Corporation	on)
DOCU	MENT NUMBER: F15000	002076	
The enc	losed withdrawal application and	fee are submitted for	filing.
	eturn all correspondence concerning the following:	g this	
		(Name of Person)	
		(Firm/Company)	
		(Address)	
	(0	City/State and Zip code	2)
For furtl	ner information concerning this mat	ter, please call:	
Enclose	(Name of Person) d is a check for the amount:	at () (Area Co	de & Daytime Telephone Number)
✓ \$35 f	Filing Fee \$\int\\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is Enclosed)	Certificate of Status & Certified
	MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL.32314		STREET ADDRESS: Amendment Section Division of Corporations 2661 Executive Center Circle Tallahassee, FL. 32301