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## COVER LETTER.

TO: Amendment Section Division of Corporations		
SUBJECT: PLARITY, INC.		
	(Name of Corporat	tion)
DOCUMENT NUMBER: F150000	02327	<del> </del>
The enclosed withdrawal application and for	ee are submitted for	r filing.
Please return all correspondence concerning matter to the following:	this	
<b>ALEX MORCATE</b>		
	(Name of Person)	
PLARITY, INC.		
	(Firm/Company)	
888 S DOUGLAS R	OAD, #110	07
	(Address)	
CORAL GABLES, F	FL 33134	
(Ci	ity/State and Zip co	de)
For further information concerning this matter	er, please call:	
ALEX MORCATE	at (305	733-7000
(Name of Person) Enclosed is a check for the amount:		Code & Daytime Telephone Number)
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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

PLARITY, INC.			
(Name of Corporation)			
F15000002327			
(Document Number of Corporation (it	known)		•
DELAWARE			
(Incorporated Under Laws of		<del>, , , , , , , , , , , , , , , , , , , </del>	
This corporation is no longer transacting business or conducting affivoluntarily surrenders its authority to transact business or conduct affine appoints the Department of State as its agent for service of process the time it was authorized to transact business or conduct affairs in F	fairs in Florida. lorida to accept service of acti	on its b	ehalf and
The following is a current mailing address for the corporation:			
888 S DOUGLAS ROAD, #11	07		
(Mailing Address)			
CORAL GABLES, FL 33134		100 - 44 (Alg)	17 FF - 72
(City/ State /Zip)		हु। ह्या	
The corporation agrees to notify the Department of State in the future	re of any change in its mai	lino ade	lress
Med Morate	2-13-2017	g m	9
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)		_
ALEX MORCATE	PRESIDEN	F	
(Typed or printed name of person signing)	(Title of person sig	mina)	