

F160000002164

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

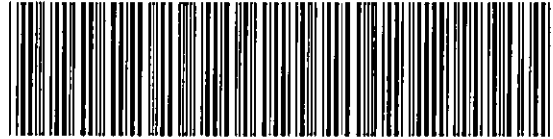
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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2017

11:18:25

Withdrawal

NOV 25 2019

I ALBRITTON

IA

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195  
REFERENCE : 060290 4722044  
AUTHORIZATION : *[Signature]*  
COST LIMIT : \$ 35.00

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ORDER DATE : November 22, 2019  
ORDER TIME : 3:18 PM  
ORDER NO. : 060290-010  
CUSTOMER NO: 4722044

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FOREIGN FILINGS

NAME: CEMOI INC

XX CORPORATE  
       LIMITED PARTNERSHIP  
       LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF STATUS

CONTACT PERSON: Amanda Robinson - EXT# 62968

EXAMINER:                      *[Signature]*

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Cemoi Inc  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** F16000002164  
\_\_\_\_\_

The enclosed **withdrawal application** and fee are submitted for filing.

Please return all correspondence concerning this  
matter to the following:

LaSonya Mcfarlane  
\_\_\_\_\_  
(Name of Person)  
  
co Pramex International  
\_\_\_\_\_  
(Firm/Company)  
  
1251 Avenue of the Americas 3Fl  
\_\_\_\_\_  
(Address)  
  
New York, NY 10020  
\_\_\_\_\_  
(City/State and Zip code)

For further information concerning this matter, please call:

LaSonya Mcfarlane \_\_\_\_\_ at ( 212 ) 583-4920  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the amount:

☒ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee,  
Certificate of Status Certified Copy Certificate of Status & Certified  
(Additional copy is Enclosed) 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**

Cemoi Inc

\_\_\_\_\_  
(Name of Corporation)

F16000002164

\_\_\_\_\_  
(Document Number of Corporation (if known))

New York

\_\_\_\_\_  
(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:

Cemoi Inc c/o Pramex 1251 Avenue of the Americas


\_\_\_\_\_  
(Mailing Address)

New York, NY 10020

\_\_\_\_\_  
(City/ State /Zip)

201  
11/18/25

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)

11/20/2019

\_\_\_\_\_  
(Date)

Nicolas FERRY

\_\_\_\_\_  
(Typed or printed name of person signing)

Corporate Secretary

\_\_\_\_\_  
(Title of person signing)

**FILING FEE \$35**