F16000002287

(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:				

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Account#: I20000000088

Date: 12/0	06/2021	
	cel Ogbonna-Amu	
Reference #:	1478376	_
Entity Name:	MATTHEWS R	ETAIL GROUP, INC.
	Incorporation/Authorization	
Amendmer	nt	
Change of	Agent	ANY ISSUES, CALL MARCEL:
Reinstaten	nent	(518) 213 - 0826
Conversion	١	Thank you!
☐ Merger		
Dissolution	/Withdrawal	
☐ Fictitious N	lame	
Other		
Authorized Amour	nt: \$35.00	
Signature:	Marcel og hower- Am	<u>, </u>

F: +852.2682.9790

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

Matthews Retail Group, Inc.

(Name of Corporation)	
F16000002287	
(Document Number of Corporation (if	known)
05/16/2016	
(Incorporated Under Laws of and date authorized to transact l	ousiness/conduct its affairs)
This corporation is no longer transacting business or conducting affavoluntarily surrenders its authority to transact business or conduct affa	
This corporation revokes the authority of its registered agent in F appoints the Department of State as its agent for service of process be time it was authorized to transact business or conduct affairs in Florida.	ased on a cause of action arising during the
The following is a current mailing address for the corporation:	
841 Apollo St. Ste. 150	2921
(Mailing Address)	1 - 1 (1) seems
El Segundo, CA 90245	
(City/ State /Zip)	SCENE NO.
The corporation agrees to notify the Department of State in the future	e of any change in its mailfilg address.
Tol Wanter	12/3/21
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)
Kyle Matthews	CEO & Chairman
(Typed or printed name of person signing)	(Title of person signing)

FILING FEE \$35

COVER LETTER

то:	Amendment Division of	nt Section f Corporations				
SUBJ	JECT:	Ma	tthews Re	etail Group,	o, Inc.	
			(Name o	f Corporatio	on)	
DOCUMENT NUMBER: F16000002287					02287	
The e	nclosed with	drawal application and	fee are sub	omitted for f	filing.	
Please	e return all co	orrespondence concerning	g this matte	er to the foll-	llowing:	
			Kyle M	atthews		
		•	(Name o	of Person)		
		Matt	hews Re	tail Group,	Inc	
			(Firm/C	ompany)		
		84	11 Apollo	St. Ste 150	O	
			(Add	iress)		
		EI	Segundo	, CA 90245	15	
		(C	City/State a	ınd Zip code	e)	
For fu	ırther informa	ation concerning this mat	ter, please	call:		
	Ky	le Matthews	at (_	615	285 3806	
	(Na	me of Person)		(Arca Coo	ode & Daytime Telephone Number)	-
Enclo	sed is a chec	k for the amount:				
□ \$3:	5 Filing Fee	□ \$43.75 Filing Fee & Certificate of Status	Certifie	d Copy onal copy is		d)
	Mailing Addi Amendmen Division of P.O. Box 6. Tallahassee	t Section Corporations 327	A D T 24	he Centre of	Section Corporations of Tallahassee proc Street, Suite 810	



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached is a form to withdraw the authority of a foreign corporation that is transacting business or conducting affairs in Florida. The requirements are as follows:

- Pursuant to section 607.1520 or 617.1520, Florida Statutes, the attached application should be completed in its entirety.
- > The fees are as follows:

Filing Fee - \$ 35.00

Certified Copy (optional) - \$8.75

Certificate of Status (additional) (optional) - \$8.75

- Checks should be made payable to the Florida Department of State.
- Please complete the attached cover letter and return it with the withdrawal application and fee.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

For further information, you may call (850) 245-6050.

CR2E023 (4/13)