

F16000002463

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

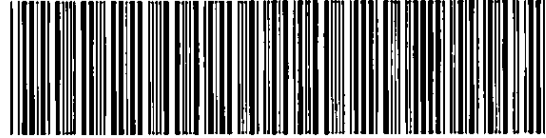
(Business Entity Name)

(Document Number)

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

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STATE  
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JUL 5 AM 10:19

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PM

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JUL 2021

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

ACCOUNT NO. : I20000000195

REFERENCE : 893175 5012771

AUTHORIZATION : 

COST LIMIT : \$ 35.00

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ORDER DATE : July 6, 2021

ORDER TIME : 2:26 PM

ORDER NO. : 893175-005

CUSTOMER NO: 5012771  
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FOREIGN FILINGS

NAME: BEST VEST USA, 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: Alexxis Weiland - EXT#

EXAMINER: \_\_\_\_\_

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Best Vest USA, Inc.

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

**DOCUMENT NUMBER:** F16000002463

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

Please return all correspondence concerning this matter to the following:

Lisa Mattson

\_\_\_\_\_  
(Name of Person)

Access Industries

\_\_\_\_\_  
(Firm/Company)

40 West 57th Street, 28th Floor

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

New York, NY 10019

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

For further information concerning this matter, please call:

Lisa Mattson

212.247.6400

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
(Name of Person)

\_\_\_\_\_  
(Area Code & Daytime Telephone Number)

Enclosed is a check for the amount:

- ☐ \$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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

Best Vest USA, Inc.

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

F16000002463

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

New York; June 1, 2016

\_\_\_\_\_  
(Incorporated Under Laws of and date authorized to transact business/conduct its affairs)

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:

425 West 50th Street, Apt. 10F

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

New York, New York 10019

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

FILED  
JUL 10 2016  
CLERK OF THE  
COURT  
JUL 10 2016  
CLERK OF THE  
COURT

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)

7/6/2021

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

Alejandro Moreno

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

President

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

**FILING FEE \$35**