

# FILE0000003136

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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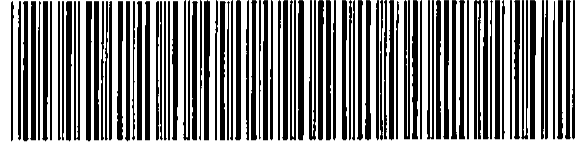
(Business Entity Name)

(Document Number)

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MAY 31 2019  
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# CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312  
850-656-4724

Date: 5/30/2019

Acc#I20160000072

*W: C DVI*

Name:	DURACELL U.S. OPERATIONS, INC.
Document #:	
Order #:	11606127

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
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Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
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Amount: \$	35.00
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Thank you!

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Duracell U.S. Operations, Inc.

(Name of Corporation)

**DOCUMENT NUMBER:**

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

Please return all correspondence concerning this matter to the following:

Monica Bliss

(Name of Person)

Duracell Distributing LLC

(Firm/Company)

181 W. Madison Street, Suite 4400

(Address)

Chicago, IL 60602

(City/State and Zip code)

For further information concerning this matter, please call:

Monica Bliss

at ( 312 ) 471-8500

(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  
2661 Executive Center Circle  
Tallahassee, FL 32301

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

Duracell U.S. Operations, Inc.

(Name of Corporation)

F16000003136

(Document Number of Corporation (if known))

Delaware

(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:

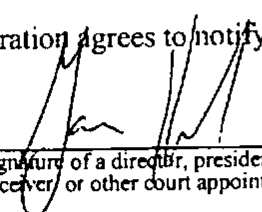
181 W. Madison Street, Suite 4400

(Mailing Address)

Chicago, IL 60602

(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)

Gary Hood

(Typed or printed name of person signing)

05/22/2019

(Date)

VP & Secretary

(Title of person signing)

**FILING FEE \$35**

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19 MAY 30 AM 9:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA