416000033223

| (Re | questor's Name) | |
|---------------------------|-------------------|-----------|
| | dress) | |
| (Ad | dress) | |
| (Cit | y/State/Zip/Phone | e #) |
| PICK-UP | WAIT | MAIL |
| , (Bu | siness Entity Nar | ne) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to I | | |
| File 1 | † | |
| | | |
| | | |
| | | |





900286877719

10/21/16--01007--024 **350.00

2018 OCT 21 AH 9: 35

playor

SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724 SUNSHINECORPORATE2014@GMAIL.COM

| Date: 10-21-16 Place file 1st. |
|--|
| 711 (|
| Capital Confirmation Inc |
| **PLEASE FILE THE ATTACHED AND RETURN:** Plain Copy Certified Copy |
| **PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY:** Document Number: Certified Copy of Arts & Amendments Certificate of Good Standing |
| **APOSTILLE'/NOTARIAL CERTIFICATION:** COUNTRY OF DESTINATION_ NUMBER OF CERTIFICATES REQUESTED |
| TOTAL AMOUNT OWED: 35 - CHECK NUMBER: 2971 PLEASE CONTACT TINA AT 850-508-1891 FOR ANY PROBLEMS OR INFORMATION ON THIS MATTER. Thank you! |
| Tina Goff, President |

COVER LETTER

| TO: Amendment Section Division of Corporations | | | | |
|--|---|--|--|--|
| | ON INC | | | |
| | Corporation) | | | |
| T40000000000 | - o. Formula, | | | |
| DOCUMENT NUMBER: F1000003223 | | | | |
| The enclosed withdrawal application and fee are subm | aitted for filing. | | | |
| Please return all correspondence concerning this matter to the following: | | | | |
| Albert J. Bart | | | | |
| (Name of | Person) | | | |
| Sherrard Roe Voigt & Harbison, PLC | | | | |
| (Firm/Cor | npany) | | | |
| 150 3rd Avenue South, Sui | te 1100 | | | |
| (Addre | ess) | | | |
| Nashville, TN 37201 | | | | |
| (City/State and | d Zip code) | | | |
| For further information concerning this matter, please ca | all: | | | |
| David C. Crenshaw at 6 | 15 ₎ 844-6222 | | | |
| (Name of Person) Enclosed is a check for the amount: | (Area Code & Daytime Telephone Number) | | | |
| \$35 Filing Fee \$43.75 Filing Fee \$\$43.75 Filing Fee \$\$43.75 Filing Fee \$\$Certified (Addition Enclosed) | Copy Certificate of Status & Certified copy is Copy (Additional copy is enclosed) | | | |
| MAILING ADDRESS: | STREET ADDRESS: | | | |
| Amendment Section Division of Corporations | Amendment Section Division of Corporations | | | |
| P.O. Box 6327 | 2661 Executive Center Circle | | | |
| Tallahassee, FL.32314 | Tallahassee, FL. 32301 | | | |

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

| | CAPITAL CONFIRMATION INC. (Name of Corporation) | | |
|---|---|--------|-----|
| | F1600003223 | | |
| | (Document Number of Corporation (if known) | | |
| | TENNESSEE | | |
| | (Incorporated Under Laws of) | | |
| - | This corporation is no longer transacting business or conducting affairs within the State of Florida and voluntarily surrenders its authority to transact business or conduct affairs in Florida. | i here | aby |
| | This corporation revokes the authority of its registered agent in Florida to accept service on its bel appoints the Department of State as its agent for service of process based on a cause of action arising the time it was authorized to transact business or conduct affairs in Florida. | | |
| | The following is a current mailing address for the corporation: | | |
| | 214 CENTERVIEW DRIVE, SUITE 265 | 2015 O | |
| | (Mailing Address) | CT 2 | 1 |
| | BRENTWOOD, TN 37027 | | |
| | (City/ State /Zip) | 9: 35 | |
| | The corporation agrees to notify the Department of State in the future of any change in its mailing address | ess. | |
| | Devil Cush | | _ |
| | (Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary) (Date) | | |
| | David C. Crenshaw Chief Financial Officer, Secretary and Trea | surer | |
| | (Typed or printed name of person signing) (Title of person signing) | | • |