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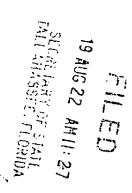
(Requestor's Nam	ne)				
(Address)					
(Address)					
(City/State/Zip/Ph	one #)				
PICK-UP WAIT	MAIL				
(Business Entity N	Name)				
(Document Number)					
Certified Copies Certifica	ates of Status				
Special Instructions to Filing Officer:					

Office Use Only



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EXAMINER:

Tallahassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE : 894353 8140239 AUTHORIZATION : COST LIMIT : \$35.00 ORDER DATE : August 22, 2019 ORDER TIME : 2:51 PM ORDER NO. : 894353-005 CUSTOMER NO: 8140239 FOREIGN FILINGS NAME: SOLIDCORE MIAMI, 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

CORPORATION SERVICE COMPANY

1201 Hays Street

## **COVER LETTER**

TO:	Amendment 5 Division of C			
SUBJ	SOLIDO	ORE MIAMI, INC		
SUDJ	ECT		(Name of Corporation	1)
DOC	UMENT NUM	BER:		
The er	nclosed withdr	awal application and	fee are submitted for fi	ling.
	return all correto the following	•	; this	
	DIMPLE MA	NGHNANI		
			(Name of Corporation)  R:	
	SOLIDCORE	<u> </u>		
	(Firm/Company)			
	1638 R STREET NW			
	·		(Address)	
	WASHINGTO	ON DC 20009		
		(C	City/State and Zip code	<u> </u>
For fu	rther information	on concerning this mat	ter, please call:	
DIMPL	E MANGHNAN		407 3.	835225
Enclos	(Name sed is a check f	of Person) or the amount:		e & Daytime Telephone Number)
<b>√</b> \$33	Filing Fee	\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is	Certificate of Status & Certified
	Amen Divisi	dment Section on of Corporations fox 6327		Amendment Section

Tallahassee, FL. 32301

Tallahassee, FL.32314

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

SOLIDCORE MIA	AMI, INC.			
(Name of Corporation	n)			
(Document Number of Corporation (if known)				
DELAWARE				
(Incorporated Under Law	vs ot)			
This corporation is no longer transacting business or conducting voluntarily surrenders its authority to transact business or conducting				
This corporation revokes the authority of its registered agent is appoints the Department of State as its agent for service of protein the time it was authorized to transact business or conduct affairs	ocess based on a cause of action arising during			
The following is a current mailing address for the corporation:	19 AL Seliku Paeli ku			
1638 R STREET NW	56 2 88			
(Mailing Address)	E O A M			
WASHINGTON DC 20009				
(City/ State /Zip)	A A			
The corporation agrees to notify the Department of State in the fi	future of any change in its mailing address.			
	8-22-2019			
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)			
ANNE MAHLUM	CEO			
(Typed or printed name of person signing)	(Title of person signing)			