

F17000001596

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

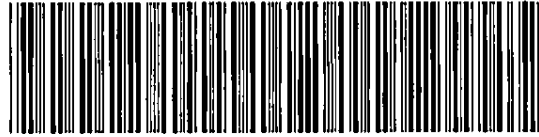
(Business Entity Name)

(Document Number)

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2021 MAY -5 AM 11:29

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SECRETARY OF STATE
MAIL ROOM

O SIMMONS

MAY 06 2021

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

ACCOUNT NO. : I20000000195
REFERENCE : 655338 5173143
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 35.00

ORDER DATE : February 10, 2021
ORDER TIME : 11:28 AM
ORDER NO. : 655338-055
CUSTOMER NO: 5173143

FOREIGN FILINGS

NAME: NTHRIVE SOLUTIONS, 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: Eyliena Baker - EXT#

EXAMINER: _____

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

nThrive Solutions, Inc.

(Name of Corporation)

F17000001596

(Document Number of Corporation (if known))

DE 04/06/2017

(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:

c/o Jen DeYoung 200 North Point Center East, Suite 600

(Mailing Address)

Alpharetta, GA 30022

(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)

04/16/2021

(Date)

Jennifer DeYoung

(Typed or printed name of person signing)

Vice President and Assistant Secretary

(Title of person signing)

FILING FEE \$35