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COVER LETTER

	Amendment Section Division of Corporations	
SUBJE	Grace Life Church, Inc.	
		(Name of Corporation)
DOCUM	MENT NUMBER: F17000003693	
The encl	losed withdrawal application and	fee are submitted for filing.
	eturn all correspondence concerning the following:	g this
	Isaac Mendoza	
		(Name of Person)
	· 	(Firm/Company)
	551 Huffstetlet Dr., Unit# 3-106	(типисопрану)
		(Address)
	Eustis, FL 32726	
	((City/State and Zip code)
For furth	ner information concerning this mat	tter, please call:
Isaac Me	endoza	630 379-2105 at (
Enclosed	(Name of Person) d is a check for the amount:	(Area Code & Daytime Telephone Number)
✓ \$35 F	Filing Fee \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & \$52.50 Filing Fee. Certified Copy Certificate of Status & Certified (Additional copy is Enclosed) \$52.50 Filing Fee. Certificate of Status & Certified Copy (Additional copy is enclosed)
	MAILING ADDRESS:	STREET ADDRESS:
	Amendment Section Division of Corporations	Amendment Section Division of Corporations

2661 Executive Center Circle

Tallahassee, FL. 32301

P.O. Box 6327

Tallahassee, FL.32314

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

Grace Life Unurch, Inc.	
(Name of Corporation)	
F17000003693	
(Document Number of Corporation	(if known)
Illinois	
(Incorporated Under Laws	of)
voluntarily surrenders its authority to transact business or conduct. This corporation revokes the authority of its registered agent in appoints the Department of State as its agent for service of proceed the time it was authorized to transact business or conduct affairs in	Florida to accept service on its behalf and ess based on a cause of action arising during
The following is a current mailing address for the corporation:	19 TALC
551 Huffstetlet Dr. Unit# 3-106	全型基 型
(Mailing Address) Eustis, FL 32726	LED LED
(City/ State /Zip)	ORIDA WALLE
The corporation agrees to notify the Department of State in the fut (Signature of a director, president or other officer - if in the hands of a receiver or other(court appointed fiduciary, by that fiduciary)	ture of any change in its mailing address. $\frac{0.2 / 2.5 / 2.0/9}{\text{ADate}}$
Isaac Mendoza	President
(Typed or printed name of person signing)	(Title of person signing)