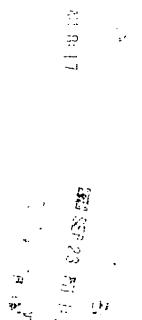
F1700005499

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C. GOLDEN SEP 2 4 2020

CT CORP

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

D	ate:	9/23/2020	
		Acc#I20160000072	a: DW
Name:	SENIOR	MARKET SALES INC	
Document #:			
Order #:	13205550 - 227		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing:			
Apostille/Notarial Certification:		Country of Destination: Number of Certs:	
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Thank you!

COVER LETTER

TO: Amendment Section Division of Corporations	
SENIOR MARKET SALES INC	
SUBJECT:	(Name of Corporation)
DOCUMENT NUMBER: F17000005499	
The enclosed withdrawal application and f	fee are submitted for filing.
Please return all correspondence concerning	this matter to the following:
	(Name of Person)
	(Firm/Company)
	(Address)
(C	City/State and Zip code)
For further information concerning this mate	ter, please call:
(Name of Person)	at () (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 & ☐ \$52.50 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA $7\,$

(Name of Corporation)

SENIOR MARKET SALES, INC.

F17000005499		
	(Document Number of	Corporation (if known)
Nebraska	12/05/2017	
(Incorpor	rated Under Laws of and date authori	zed to transact business/conduct its affairs)
This corporation is no local voluntarily surrenders i	longer transacting business or ed ts authority to transact business	onducting affairs within the State of Florida and hereby or conduct affairs in Florida.
appoints the Departmer	tes the authority of its registered at of State as its agent for service to transact business or conduct a	ed agent in Florida to accept service on its behalf and of process based on a cause of action arising during the ffairs in Florida.
The following is a curre	ent mailing address for the corpo	oration:
8420 West Dod	ge Rd Suite 510	
	(Mailing	Address)
Omaha, NE 681	14	
	(City/ S	tate /Zip)
•	1/L	te in the future of any change in its mailing address.
(Signature of a direct receiver or other co	tor, president or other officer - if in the han ourt appointed fiduciary, by that fiduciary)	ds of a (Date)
Jennifer Kurz	V	Secretary
(Typed or p	rinted name of person signing)	(Title of person signing)

FILING FEE \$35