

# F18000005653

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

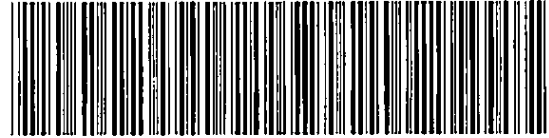
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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04/25/22--01001--006 \*\*160.00

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2022 MAY 11 AM 8:14

RECEIVED

2022 APR 22 PM 3:05

CLERK OF COURT  
TALLAHASSEE, FLORIDA

Withdrawn

MAY 13 2022

D CONNELL

**CORPORATE  
ACCESS,  
INC.**

*When you need ACCESS to the world*

35

236 East 6th Avenue, Tallahassee, Florida 32303  
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666, Fax (850) 222-1666

**WALK IN**

**PICK UP:** 4/22 DANNY

**CERTIFIED COPY**

**XX PHOTOCOPY**

**CUS**

**XX FILING**

**WITHDRAWAL**

1. ASSUREALLIANCE, INC  
(CORPORATE NAME AND DOCUMENT #)

*File 1st*

2. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

3. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

4. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

5. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

6. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL  
INSTRUCTIONS:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 30, 2022

CORPORATE ACCESS

*Corrected*

SUBJECT: ASSUREALLIANCE, INC.  
Ref. Number: F18000005653

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

ASSUREALLIANCE, INC. WAS QUALIFIED TO TRANSACT BUSINESS IN THE STATE OF FLORIDA ON 12/05/2018. PLEASE CORRECT THE DATE ON LINE 3 OF THE WITHDRAWAL FORM.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell  
Regulatory Specialist II Supervisor

Letter Number: 922A00010040

RECEIVED  
2022 MAY 11 AM 11:15  
ALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 25, 2022

CORPORATE ACCESS

SUBJECT: ASSUREALLIANCE, INC.  
Ref. Number: F18000005653

RECEIVED  
2022 APR 28 PM 3:50  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

We have received your document for ASSUREALLIANCE, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The entity's date of incorporation/organization must be listed in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Octavia L Simmons  
Regulatory Specialist II Supervisor

Letter Number: 322A00009583

*Corrected  
File /st*

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** AssureAlliance, Inc.

\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** \_\_\_\_\_

The enclosed **withdrawal application** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jennie Kopala

\_\_\_\_\_  
(Name of Person)

SIAA, Inc.

\_\_\_\_\_  
(Firm/Company)

234 Lafayette Road

\_\_\_\_\_  
(Address)

Hampton, NH 03842

\_\_\_\_\_  
(City/State and Zip code)

For further information concerning this matter, please call:

Jennie Kopala

at ( <sup>603</sup> ) <sup>601-1268</sup>

\_\_\_\_\_  
(Name of Person)

\_\_\_\_\_  
(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 & 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**

AssureAlliance, Inc.

(Name of Corporation)

F18000005653

(Document Number of Corporation (if known))

South Carolina - 12/05/2018

(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:

420 The Parkway, Suite L

(Mailing Address)

Greer, SC 29650

(City/ State /Zip)

FILED  
2022 MAY 11 AM 8:14  
CLERK OF COURT  
JULIA A. BROWN, CLERK  
COURT OF APPEALS  
1000 PENNSYLVANIA AVE  
SUITE 1000  
TALLAHASSEE, FL 32301-1000  
TEL: 904.239.2000  
FAX: 904.239.2001  
WWW.COURTS.FL.GOV

The corporation agrees to notify the Department of State in the future of any change in its mailing address.

*Philip T. Evans*

(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

4/14/2022

(Date)

Philip T. Evans

(Typed or printed name of person signing)

Manager

(Title of person signing)

**FILING FEE \$35**