F19000000785

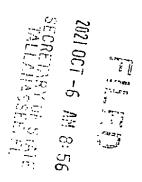
(Req	uestor's Name)				
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificate	s of Status			
Special Instructions to Fi	ling Officer:				
	-				
		_			





100373132431

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CORPORATE ACCESS,

When you need ACCESS to the world

INC.

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

	WALKIN			
	PICK 1	UP:	10/6 DANNY	
XX	CERTIFIED COPY PHOTOCOPY CUS			
XX	K FILING	INC		
1.	WILLIAM GOLDBERG I		ND CORP.	
2.	(CORPORATE NAME AND DOCUME	NT #)		
3.	(CORPORATE NAME AND DOCUME	NT #)		
4.	(CORPORATE NAME AND DOCUME	NT #)		
5.	(CORPORATE NAME AND DOCUME	NT #)		
6.	(CORPORATE NAME AND DOCUME	NT #)		
SPECIA INSTRU	AL UCTIONS:	-		

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

(Name of Corporation	on)
F1900000785	
(Document Number of Corporati	on (if known)
Incorporated in New York on 4/07/1964 & Authorized to Cond	fuct Business in Florida on 2/13/2019
(Incorporated Under Laws of and date authorized to tran	nsact business/conduct its affairs)
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	et affairs in Florida.
appoints the Department of State as its agent for service of procedure it was authorized to transact business or conduct affairs in I	ess based on a cause of action arising during th
The following is a current mailing address for the corporation:	
589 5TH AVE.	202 SEC 17
(Mailing Address) NEW YORK, NY 10017	TOC TO THE PARTY OF THE PARTY O
(City/ State /Zip)	200
<i>,</i>	
The corporation agrees to notify the Department of State in the fi	uture of any change in its mailing address.
Alay Cal	September 27, 2021
(Signature of a director, president or other officer - it in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)
Hilary Gale	Director of Operations
(Typed or printed name of person signing)	(Title of person signing)

FILING FEE \$35