F19000002213

(Requestor's Name)
(Address)
(Address)
(Adcress)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Withdrawal

2023 JAH 25 AM 11: 12

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A. RAMSEY JAN 26 2023



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:	01/25/2023			
	Greg Pintacuda			
Reference	#:1868599			
	ne:Cl	MN-RUS, INC		
☐ Artic	cles of Incorporation/Authorizat	ion to Transact Business		
☐ Ame	endment			
Change of Agent				
Reinstatement				
Conversion				
☐ Merger				
✓ Dissolution/Withdrawal				
☐ Fict	itious Name			
Oth	er			
Authorized	Amount:\$35			
Signature:	AJA			

F: 800.944.6607

F: +852.2682.9790

COVER LETTER

TO: Amendment Section Division of Corporations	
CMN-RUS, Inc.	
SUBJECT: CSIN-ROS, IIIC.	(Name of Corporation)
DOCUMENT NUMBER: F19000002213	
The enclosed withdrawal application and	fee are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
Angela Dorman, Paralegal	
	(Name of Person)
Bose McKinney & Evans LLP	
	(Firm/Company)
111 Monument Circle, Suite 2700	
	(Address)
Indianapolis, IN 46204	
((City/State and Zip code)
For further information concerning this mat	ter, please call:
Angela Dorman	at () 684-5296
(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 & □ \$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

CMN-RUS, Inc.	
(N	ame of Corporation)
F19000002213	ame of Corporation) imber of Corporation (if known) authorized to transact business/conduct its affairs)
(Document Nu	imber of Corporation (if known)
Indiana	
(Incorporated Under Laws of and date	e authorized to transact business/conduct its affairs)
time it was authorized to transact business or cor The following is a current mailing address for th	
•	Mailing Address)
Evansville, IN 47715	
	(City/ State /Zip)
The corporation agrees to notify the Department Lohn H. Weber Telephore Decision 15 (2) CGT	of State in the future of any change in its mailing address.
(Signature of a director, president or other officer - if it receiver or other court appointed fiduciary, by that fice	n the hands of a (Date) duciary)
Lohn II. Weber	CFO
(Tenad or printed game of porcen cigning)	(Tale of nervon signing)

FILING FEE \$35