Faccos 471

	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-U	MAIL MAIL	
	4)	
	(Business Entity Name)	
	(12	
	(Document Number)	
Certified Copies	Certificates of Status	
Special Instructions to Filing Officer		

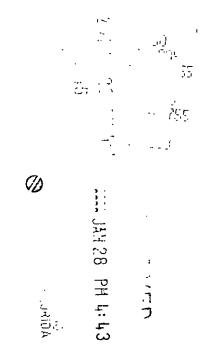
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R. WHITE JAN 28 2021

COVER LETTER

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y.

Division of Corporations	
SUBJECT:	(Name of Corporation)
DOCUMENT NUMBER:F76	
The enclosed withdrawal application and f	ee are submitted for filing.
Please return all correspondence concerning	this matter to the following:
Chc	(Name of Person)
	(Firm/Company)
	SE Znd av
	ity/State and Zip code)
For further information concerning this matt	
Christepher Resers (Name of Person)	at (30) 888 - 2868 (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 Certificate of Status & Certified (Additional copy is Enclosed) ☐ \$43.75 Filing Fee & ☐ \$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

(Name of Corporation)	
(Name of Corporation)	· · · · · · · · · · · · · · · · · · ·
F700000471 (Document Number of Corporation (if known)	
(Document Number of Corporation (if known)	
(Incorporated Under Laws of and date authorized to transact business/conduct its	
(Incorporated Under Laws of and date authorized to transact business/conduct its	s affairs)
This corporation is no longer transacting business or conducting affairs within the St voluntarily surrenders its authority to transact business or conduct affairs in Florida.	tate of Florida and hereby
This corporation revokes the authority of its registered agent in Florida to accept appoints the Department of State as its agent for service of process based on a cause of ime it was authorized to transact business or conduct affairs in Florida.	
The following is a current mailing address for the corporation:	;
Mailing Address)	- : : -
M:: (City/ State /Zip)	· · · · · · · · · · · · · · · · · · ·
(City/ State /Zip)	
The corporation agrees to notify the Department of State in the future of any change i	n its mailing address.
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	<u> </u>
(Typed or printed name of person signing) (Title o	f person signing)

FILING FEE \$35