

F20000003118

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

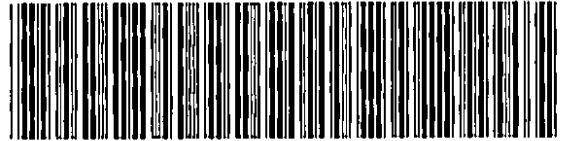
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

12/29/20

Office Use Only



100357072971

RECEIVED
2020 DEC 29 PM 1:59
TALLAHASSEE, FLORIDA

Withdrawal

FILED
2020 DEC 29 PM 4:24
TALLAHASSEE, FLORIDA

JAN 07 2021
D CONNELL

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 588427, 8258277

AUTHORIZATION : 

COST LIMIT : \$ 35.00

ORDER DATE : December 28, 2020

ORDER TIME : 11:18 AM

ORDER NO. : 588427-010

CUSTOMER NO: 8258277

FOREIGN FILINGS

NAME: DAVID DONAHUE INC.

XX CORPORATE
 LIMITED PARTNERSHIP
 LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF STATUS

CONTACT PERSON: Eyliena Baker - EXT#

EXAMINER: _____



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 30, 2020

CSC

RESUBMIT
Please give original
submission date as file date

JAN-6 PM 2:01

SUBJECT: DAVID DONAHUE, INC.
Ref. Number: F20000003118

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

The jurisdiction under the laws of which the entity is incorporated or organized must be included in the document.

Please provide the date the entity was authorized to transact business in the state of Florida.

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.

Terri J Schroeder
Regulatory Specialist III

Letter Number: 220A00026259

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DAVID DONAHUE INC
(Name of Corporation)

DOCUMENT NUMBER: EIN = 13-2733501

The enclosed withdrawal application and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rhama Medina
(Name of Person)

David Donahue INC
(Firm/Company)

1 County Rd, BLDG A1
(Address)

Secaucus, NJ 07094
(City/State and Zip code)

For further information concerning this matter, please call:

Rhama Medina at (646) 753-9275
(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**

David Donahue INC
(Name of Corporation)

EIN = 13-2733501 F2-3118
(Document Number of Corporation (if known))

New York, 07/16/2020

(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:

1 County Rd, BLDG A2
(Mailing Address)

Secaucus, NJ 07094
(City/State/Zip)

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

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

12/28/20
(Date)

Robert Donahue
(Typed or printed name of person signing)

Officer
(Title of person signing)

FILING FEE \$35

FILED

2020 DEC 29 P 4:24
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA