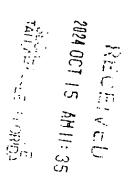
E 20000005774

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

	ivision of Corporations	
SUBJEC	Exscribe, Inc.	
00000		(Name of Corporation)
DOCUM	ENT NUMBER: F20000005774	
The enclo	osed withdrawal application and	I fee are submitted for filing.
Please ret	urn all correspondence concernir	ng this matter to the following:
-		(Name of Person)
-		(Firm/Company)
-		(Address)
-	(City/State and Zip code)
For furthe	er information concerning this ma	atter, please call:
Patrick Horan		at (561) 880.2998
	(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed	is a check for the amount:	
□ \$35 Fi	ling 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)
A D P.	ailing Address: mendment Section ivision of Corporations O. Box 6327 allahassee. 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

Exscribe, Inc.	
(Name of Corporat	tion)
F20000005774	
(Document Number of Corpora	ation (if known)
Delaware - 12/29/2020	
(Incorporated Under Laws of and date authorized to tr	ransact business/conduct its affairs)
This corporation is no longer transacting business or conductivoluntarily surrenders its authority to transact business or conductive to transactive to the conductive to transactive to the conductive to transactive to the conductive to the	
This corporation revokes the authority of its registered ager appoints the Department of State as its agent for service of protime it was authorized to transact business or conduct affairs in	cess based on a cause of action arising during the
The following is a current mailing address for the corporation:	9
4850 T-Rex Ave., Suite 200	
(Mailing Addres	s)
Boca Raton, FL 33431	
(City/ State /Zip	
The corporation agrees to notify the Department of State in the	e future of any change in its mailing address.
Patrick Horan	10/9/2024
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that tiduciary)	(Date)
Patrick Horan	Assistant Secretary
(Typed or printed name of person signing)	(Title of person signing)

FILING FEE \$35