F21000001308

| (Requestor's Name) |
|---|
| (6.1.1) |
| (Address) |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| (Document Number) |
| , |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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WITH DESERVE FROM

2023 APR -4 AHII: 40

5.9

A. RAMSEY APR - 5 2023 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 636157 4320744

AUTHORIZATION : Springle Range

COST LIMIT : \$ 35.00

ORDER DATE: April 4, 2023

ORDER TIME : 10:21 AM

ORDER NO. : 636157-010

CUSTOMER NO: 4320744

FOREIGN FILINGS

NAME: PENLANDIA 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: Alexxis Weiland-sorenson - EXT#

COVER LETTER

| TO: Amendme Division o | nt Section f Corporations | |
|---------------------------|--|---|
| SUBJECT: Penla | andia Inc. | |
| | | (Name of Corporation) |
| DOCUMENT N | JMBER: F21000001308 | |
| The enclosed with | idrawal application and | fee are submitted for filing. |
| Please return all c | orrespondence concernin | g this matter to the following: |
| Maureen S | Sansone | |
| _ | | (Name of Person) |
| c/o Loeb F | Block & Partners LLP | |
| | | (Firm/Company) |
| 505 Park A | Avenue, 8th Floor | |
| | | (Address) |
| New York | . New York 10022 | |
| | (0 | City/State and Zip code) |
| For further inform | ation concerning this ma | tter, please call: |
| Maureen Sansone | | at (732) 856-2397 |
| (Na | ime of Person) | (Area Code & Daytime Telephone Number) |
| Enclosed is a chec | k 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) |
| P.O. Box 6 | nt Section f Corporations | 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

| | Penlandia Inc. | - 3 |
|---------|---|--|
| | (Name of Corporation | n) 💸 💆 💆 |
| | F21000001308 | TO THE STATE OF TH |
| | (Document Number of Corporati | on (if known) |
| | Delaware: Authorized to do business in Florida on March 9, 20 | 21 |
| | (Incorporated Under Laws of and date authorized to tran | sact business/conduct its affairs) |
| | orporation is no longer transacting business or conducting arily surrenders its authority to transact business or conducting the surrenders its authority to transact business or conducting the surrenders its authority to transact business or conducting the surrenders its authority to transact business or conducting the surrenders is a surrender transacting business or conducting the surrenders is a surrender transacting business or conducting the surrender transacting business or conducting the surrender transacting business or conducting the surrender transacting business or conducting transacting the surrender transacting | |
| appoint | orporation revokes the authority of its registered agent ts the Department of State as its agent for service of proce was authorized to transact business or conduct affairs in l | ess based on a cause of action arising during the |
| The fol | llowing is a current mailing address for the corporation: | |
| | 505 Park Avenue, 8th Floor | |
| | (Mailing Address) | |
| | New York, New York 10022 | |
| | (City/ State /Zip) | |
| The cor | rporation agrees to notify the Department of State in the f | future of any change in its mailing address. |
| | (Signature of a director, president or other officer - if in the hands of a | 03/31/2023 |
| | (Signature of a director, president of other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary) | (Date) |
| | David J. Leibman | President |
| | (Typed or printed name of person signing) | (Title of person signing) |

FILING FEE \$35