F2100001398

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<i>y</i> .	(City/State/Zip/Phone #)		
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COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJ	RCT: Adalta Corporation
SUDJ	(Name of Corporation)
DOCI	UMENT NUMBER: F21000001398
The er	nclosed withdrawal application and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Matthew Polstein
	(Name of Person)
	(Firm/Company)
	4855 LB MCLEOD ROAD
	(Address)
	ORLANDO, FL 32811
	(City/State and Zip code)
For fu	rther information concerning this matter, please call:
Matthe	786 525-5138 at ()
	(Name of Person) at () (Area Code & Daytime Telephone Number)
Enclo	sed is a check for the amount:
□ \$3:	5 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee, Certificate of Status Certified Copy (Additional copy is Enclosed) Copy (Additional copy is enclosed)
	Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

Adalta Corporation (Name of Corporation)	·
F21000001398	
(Document Number of Corporation (if known)
Oregon and 03-12	-2021
(Incorporated Under Laws of and date authorized to transac	t business/conduct its affairs)
This corporation is no longer transacting business or conducting at voluntarily surrenders its authority to transact business or conduct a	
This corporation revokes the authority of its registered agent in appoints the Department of State as its agent for service of process time it was authorized to transact business or conduct affairs in Floring	based on a cause of action arising during the
The following is a current mailing address for the corporation:	
4855 LB MCLEOD ROAD	
(Mailing Address)	
ORLANDO, FL 32811	
(City/ State /Zip)	
The corporation agrees to notify the Department of State in the future of Matthew Polskin	are of any change in its mailing address.
(Signstate of Felicetor, president or other officer - if m the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)
Matthew Polstein	Chief Executive Officer
(Typed or printed name of person signing)	(Title of person signing)
FILING FEE \$35	