

F 210000004696

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

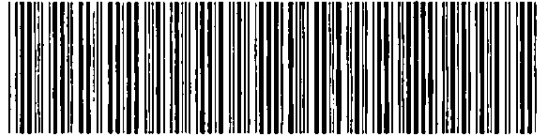
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FL  
OFFICE OF THE  
ALLAHASSEES FLOOR 1

4/27/2022 12:03 PM

2022 MAY 12 PM 1:03

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**CT CORP**

**3458 Lakeshore Drive, Tallahassee, FL 32312  
850-656-4724**

**Date:** 05/12/2022  
Acc#120160000072

*eric DW*

Name:	E Solutions Inc.
Document #:	
Order #:	14295627

Certified Copy of Arts & Amend:	<input type="checkbox"/>	1-2 filing   withdrawal 1st - qualification 2nd	
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>	thank you!	
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

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	COGS: <input type="checkbox"/>

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Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ **35.00**

Thank you!

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** E Solutions Inc.  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** F21000004696  
\_\_\_\_\_

The enclosed **withdrawal application** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Orquidea Wirges  
\_\_\_\_\_  
(Name of Person)

Comfort Systems USA, Inc.  
\_\_\_\_\_  
(Firm/Company)

675 Bering Drive, Suite 400  
\_\_\_\_\_  
(Address)

Houston, TX 77057  
\_\_\_\_\_  
(City/State and Zip code)

For further information concerning this matter, please call:

Orquidea Wirges at ( 713 ) 832-9636  
\_\_\_\_\_  
(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

**FILED**

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

SECRETARY OF STATE  
TALLAHASSEE, FL

E Solutions Inc.

\_\_\_\_\_  
(Name of Corporation)

F2100004696

\_\_\_\_\_  
(Document Number of Corporation (if known))

Indiana

08/13/2021

\_\_\_\_\_  
(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:

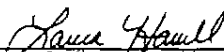
2350 N. Shadeland Avenue

\_\_\_\_\_  
(Mailing Address)

Indianapolis, IN 46219

\_\_\_\_\_  
(City/ State /Zip)

The corporation agrees to notify the Department of State in the future of any change in 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)

05/11/2022

\_\_\_\_\_  
(Date)

Laura Howell

\_\_\_\_\_  
(Typed or printed name of person signing)

Vice President

\_\_\_\_\_  
(Title of person signing)

**FILING FEE \$35**