## F9500000348

4				
(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:				
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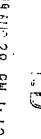
Office Use Only

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2019 / 113 28 PM 1: [:



C. GOLDEN AUG 2 9 2019 CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 886968 8054806

AUTHORIZATION :

COST LIMIT : \$ 3(5'.00

ORDER DATE : August 15, 2019

ORDER TIME : 9:29 AM

ORDER NO. : 886968-055

CUSTOMER NO: 8054806

## FOREIGN FILINGS

NAME: UNIFIED INVESTIGATIONS AND

SCIENCES, 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: Amanda Robinson - EXT#

## **COVER LETTER**

	endment Section vision of Corporations		
SUBJECT		nces, Inc.	
	·	(Name of Corporation	n)
DOCUME	NT NUMBER: F95000000248	3	
The enclos	ed withdrawal application and	fee are submitted for f	iling.
	rn all correspondence concernin ne following:	g this	
_		(Name of Person)	
		CSC	
		(Firm/Company)	
_		(Address)	
	(1	City/State and Zip code	)
For further	information concerning this ma	tter, please call:	
	CSC	at ()_	
Enclosed is	(Name of Person) a check for the amount:	(Area Coo	de & Daytime Telephone Number)
\$35 Fili	ng Fee \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is Enclosed)	Certificate of Status & Certified
	MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL.32314		STREET ADDRESS: Amendment Section Division of Corporations 2661 Executive Center Circle Tallahassee, FL. 32301

## APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA PH 1: 14

Unified Investigations And Sciences, Inc.  (Name of Corporatio	n)
F95000000248	
(Document Number of Corporation	on (if known)
Delaware	
(Incorporated Under Lav	vs of)
voluntarily surrenders its authority to transact business or conduct. This corporation revokes the authority of its registered agent appoints the Department of State as its agent for service of prothe time it was authorized to transact business or conduct affairs. The following is a current mailing address for the corporation:  c/o Sedgwick Claims Management Services, Inc. Legal Description:	in Florida to accept service on its behalf and cess based on a cause of action arising during in Florida.
(Mailing Address)	
Memphis, TN 38125	
(City/ State /Zip)	
The corporation agrees to notify the Department of State in the fine (Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	Future of any change in its mailing address.  8 /20/(9 (Date)
Stephen R. Hurley	Sr. Vice President and Secretary
(Typed or printed name of person signing)	(Title of person signing)