F95000004541

(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
/C+	y/State/Zip/Phone #)	·	
(Cit	y/State/Zip/Phone #1		
PICK-UP	WAIT	MAIL	
(Bu	siness Entity Name)		
(Do	cument Number)		
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al Instructions to Filin	na Officer:		
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	Office Use Only		



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SECRETARY - 4 AM 9:

2023 HAY -4 AH 9: C

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CORPORATION SERVICE COMPANY 1201 Hays Street

PPTlahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 692375 __ 4813078

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE : April 21, 2023

ORDER TIME : 9:42 AM

ORDER NO. : 692375-010

CUSTOMER NO: 4813078

FOREIGN FILINGS

NAME: DCL PORT FACILITIES

CORPORATION

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#

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

DCL PORT FACILITIES CORPORATION	
(Name of Corporation)	
F95000004541	2023 SEC TALL
(Document Number of Corporation	(if known)
CALIFORNIA	
(Incorporated Under Laws of and date authorized to transact	ct business/conduct its affairs)
This corporation is no longer transacting business or conducting a voluntarily surrenders its authority to transact business or conduct.	
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 Flo The following is a current mailing address for the corporation:	based on a cause of action arising during the
500 SOUTH BUENA VISTA STREET	
(Mailing Address)	
BURBANK, CA 91521	
(City/ State /Zip)	
The corporation agrees to notify the Department of State in the future Challer A. Shangy.	ure of any change in its mailing address. 04/20/2023
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)
CHAKIRA H. GAVAZZI	SECRETARY
(Typed or printed name of person signing)	(Title of person signing)

FILING FEE \$35