## F960000003543

(Requestor's Name)	_			
(Address)	_			
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status	_			
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Withdrawal

08/05/21--01019--020 \*\*35.00

FILED 2021 MAY 19 FH 12: 31

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## FLORIDA DEPARTMENT OF STATE: Division of Corporations

May 12, 2021

CHARLES R. MCDARRIS CHARLES R. MCDARRIS LTD. 209 GNARLED OAKS DR PONTE VEDRA BEACH, FL 32082

SUBJECT: CHARLES R. MCDARRIS, LTD., INC.

Ref. Number: F96000003543

We have received your document for CHARLES R. MCDARRIS, LTD., INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Dissolution to dissolve a Florida domestic corporation have been submitted in error. A withdrawal application must be filed to withdraw the authority of a foreign corporation in Florida.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey OPS

Letter Number: 121A00009969



TO: Amendment Section			
Division of Corporations	10.00		
SUBJECT: Charles R. (Na	MEDawis Ltd,		
DOCUMENT NUMBER: F 960	000003543		
The enclosed withdrawal application and fee a	re submitted for filing.		
Please return all correspondence concerning this	matter to the following:		
Charles R.	MEDawris		
Charles Ri	M & Dawis Ltd.		
209 Guardi	of Oaks Dr.		
Ponte Vedra	(Address) Deady, FL 32082		
(City/S	State and Zip code)		
For further information concerning this matter, p	olease call:		
	at ( <u>904</u> ) <u>923 - 0/85</u> (Area Code & Daytime Telephone Number)		
(Name of Person)	(Area Code & Daytime Telephone Number)		
Enclosed is a check for the amount: Check	chas already cashed		
□ \$35 Filing Fee □ \$43.75 Filing Fee & □	\$43.75 Filing Fee & \$\Bigcup \\$52.50 \text{Filing Fee,} \\ \text{ertified Copy} \text{Certificate of Status & Certified}		
(,	Additional copy is Copy (Additional copy is enclosed)  Enclosed)		
Mailing Address:	Street Address:		
Amendment Section Division of Corporations	Amendment Section Division of Corporations		
P.O. Box 6327	The Centre of Tallahassee		
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Tallahassee, FL 32314

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

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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:

209 Cona	lel Oak	S DV.	
,	(Mailing Address)		
Parte Ve	edva Be	ach, Fo	_ 32082
	(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)

(Date)

(Title of person signing)