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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

C TALLENT

## DISSOLUTION OR WITHDRAWAL FLORIDA-ASE, INC.

DEC 1 3 2019

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

| Florida-ASE, Inc.   |   | ٠.   |
|---|---|--|
| (Name of Corporation  | n)                                      | <del></del>                                    |
|   |   | ٠.   |
| F96000003853  |   |  |
| (Document Number of Corporation   | on (if known)                           | <del></del> .                                  |
|   |   |  |
| Delaware  |   |  |
| (Incorporated Under Lav   | vs of)                                  |  |
|   |   | •  |
| his corporation revokes the authority of its registered agent oppoints the Department of State as its agent for service of projectime it was authorized to transact business or conduct affairs | cess based on a cause of action         |  |
|   |   | . 26   |
| he following is a current mailing address for the corporation:  |   | . <u>= = = = = = = = = = = = = = = = = = =</u> |
| 8283 Greensboro Drive   |   | ) DEC  |
| (Mailing Address)   | , | <u>~</u>                                       |
|   |   | A  |
| McLean, VA 22102  |   | _ <del>_</del>                                 |
| (City/ State /Zip)  |   | =: ::  |
|   |   | tuj 😥  |
|   |   | •  |
| he corporation agrees to notify the Department of State in the f  | future of any change in its mailin      | g address.                                     |
| J 61.   | •                                       |  |
| James St Wens   | December 6, 2019                        |  |
| (Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)   | , (Date)                                |  |
| Laura Adams   | Treasurer                               |  |
| (Typed or printed name of person signing)   | (Title of person signin                 | ·g)  |
|   |   |  |
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