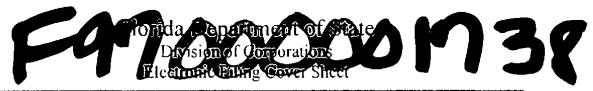
Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000007550 3)))



H200000075503ABCT

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

 $\ddot{\odot}$

Account Name : C T CORPORATION SYSTEM

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

DISSOLUTION OR WITHDRAWAL IDC ARCHITECTS, PC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

2020 JAN -8 AM 10: 51 SECRETARY OF STATE

Electronic Filing Menu

Corporate Filing Menu

Help

0502 6 - NAC

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

	IDC Architects, PC		
	(Name of Corporation)		
<u> </u>	F97000001738		
	(Document Number of Corporation (if known)	
	Pennsylvania		
	(Incorporated Under Laws of and date authorized to transac	t business/conduct its affairs)	•
٠.			• •
volunt	orporation is no longer transacting business or conducting a arily surrenders its authority to transact business or conduct a	ffairs within the State of Florida affairs in Florida.	and hereby
appoin	orporation revokes the authority of its registered agent in its the Department of State as its agent for service of process was authorized to transact business or conduct affairs in Flor	based on a cause of action arisin	behalf and g during the
The fo	llowing is a current mailing address for the corporation:		
٠.	9191 S Jamaica Street	77 77 038	2020
· · · ·	(Mailing Address)	두쥬	<u>ک</u>
	Englewood, CO 80112	AFIAS	8
	(City/ State /Zip)	OF STA	AR IO
The co	rporation agrees to notify the Department of State in the futu	ire of any change in its mailing a	ogness.
	White River	1/7/2020	
·	(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)	
	Cheryl Rimas	Asst Secretary	
	(Typed or printed name of person rigning)	(Title of person signing)	 _

FILING FEE \$34