

F980000003993

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

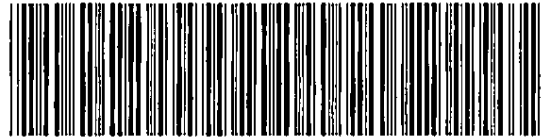
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600388153576

RECEIVED
2022 MAY 20 AM 10:17
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
FILED
2022 MAY 20 AM 8:23
TALLAHASSEE, FL

of 5/23/2022

CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312

850-656-4724

Date: 05/20/2022

Acc#I20160000072

en: L SW

Name:	ANDLER PACKAGING LLC
Document #:	
Order #:	14339999

Certified Copy of Arts & Amend:	<input type="checkbox"/>	1-2 FILING: 1. file withdrawal; 2. file registration	
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

Filing: <input checked="" type="checkbox"/>	Certified: <input type="checkbox"/>
	Plain: <input checked="" type="checkbox"/>
	COGS: <input type="checkbox"/>

Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ 35.00

Thank you!

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Andler Packaging Corporation

(Name of Corporation)

DOCUMENT NUMBER: F98000003993

The enclosed **withdrawal application** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kathrine LeBlanc

(Name of Person)

Burns & Levinson LLP

(Firm/Company)

125 High St.

(Address)

Boston, MA 02110

(City/State and Zip code)

For further information concerning this matter, please call:

Kathrine LeBlanc

at (617) 345-3000

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the amount:

☒ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is Enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

FILED

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

Andler Packaging Corporation

(Name of Corporation)

SECRETARY OF STATE
TALLAHASSEE, FL

F98000003993

(Document Number of Corporation (if known))

Massachusetts

07/14/1998

(Incorporated Under Laws of and date authorized to transact business/conduct its affairs)

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:

PO Box 499125

(Mailing Address)

Everett, MA 02149

(City/ State /Zip)

The corporation agrees to notify the Department of State in the future of any change in its mailing address.

Designated by
Marc Andler
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

5/19/21

(Date)

Marc Andler

(Typed or printed name of person signing)

President

(Title of person signing)

FILING FEE \$35