## 398000000806

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 3,06038 4804008

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE: May 29, 2020

ORDER TIME: 12:49 PM

ORDER NO. : 306038-065

CUSTOMER NO: 4804008

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## FOREIGN FILINGS

NAME: HELZBERG'S DIAMOND SHOPS, INC.

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: Kadesha Roberson - EXT#

EXAMINER:

## **COVER LETTER**

TO: Amendment Section Division of Corporation	s
SUBJECT: Helzberg's Diamond	Shops, Inc.
	(Name of Corporation)
DOCUMENT NUMBER: _F9	08000006806
The enclosed withdrawal appl	ication and fee are submitted for filing.
Please return all correspondenc	e concerning this matter to the following:
	(Name of Person)
	(Firm/Company)
	(Address)
	(City/State and Zip code)
For further information concern	ning this matter, please call:
	at ()  (Area Code & Daytime Telephone Number)
(Name of Persor	(Area Code & Daytime Telephone Number)
Enclosed is a check for the amo	ount:
	Tiling Fee & \$\Bigcup \\$43.75 Filing Fee & \$\Bigcup \\$52.50 Filing Fee,.  te of Status
Mailing Address: Amendment Section Division of Corporation P.O. Box 6327 Tallahassec, FL 32314	Street Address: Amendment Section  Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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

Helzberg's Diamond Shops, Inc.

	(Name of Cor	poration)
F9800000680	06	
	(Document Number of Co	orporation (if known)
Missouri	; 12/15/1998	
(Incorp	orated Under Laws of and date authorized	to transact business/conduct its affairs)
his corporation is no oluntarily surrenders	o longer transacting business or conc its authority to transact business or	ducting affairs within the State of Florida and herel conduct affairs in Florida.
ppoints the Departme	okes the authority of its registered ent of State as its agent for service of to transact business or conduct affa	agent in Florida to accept service on its behalf ar f process based on a cause of action arising during the irs in Florida.
he following is a cur	rent mailing address for the corpora	tion:
1825 Swift Av	'enue	
-	(Mailing Ac	ldress)
North Kansas	City, Missouri 64116	
	(City/ State	/Zip)
he corporation agree	s to notify the Department of State i	n the future of any change in its mailing address.
(Signature of a diferenceiver or other c	ctor, president or other officer - if in the hands of ourt appointed fiduciary, by that fiduciary)	5/28/2020 (Date)
Brad Hampton		Treasurer

**FILING FEE S35**