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CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE: 846359 AUTHORIZATION COST LIMIT ORDER DATE: October 3, 2017 ORDER TIME : 9:14 AM ORDER NO. : 846359-015 CUSTOMER NO: 7393072 FOREIGN FILINGS NAME: SL FINANCIAL SERVICES CORPORATION XXX CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY XXXX WITHDRAWAL/CANCELLATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY XXX PLAIN STAMPED COPY _____ CERTIFICATE OF STATUS

EXAMINER:

CONTACT PERSON: Roxanne Turner - EXT#

COVER LETTER

	Amendment Section Division of Corporations				
SUBJE	SL FINANCIAL SERVICES COR	PORATION			
		(Name of Corporation	1)		
DOCU	MENT NUMBER: F99000006396				
The end	closed withdrawal application and f	ee are submitted for fi	ling.		
	return all correspondence concerning to the following:	this			
	Veronica Cote				
		(Name of Person)			
	SL FINANCIAL SERVICES CORPORATION				
		(Firm/Company)			
	PO BOX 334				
		(Address)			
	North Salem, NY 10560				
	(C	ity/State and Zip code)		
For furt	her information concerning this matt	er, please call:			
Veronic	a Cote	203 9	84-1846		
Enclose	(Name of Person) ed is a check for the amount:	(Area Cod	e & Daytime Telephone Number)		
S 35	Filing Fee S43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is Enclosed)	: \$\sums \\$52.50 \text{ Filing Fee,} \\ \text{Certificate of Status & Certified} \\ \text{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 2661 Executive Center Circle		

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

SL FINANCIAL SERVICES CORPORATION		
(Name of Corporation)	-
F99000006396		
(Document Number of Corporation	n (if known)	_
DE		
(Incorporated Under Law	's of)	
This corporation is no longer transacting business or conducting voluntarily surrenders its authority to transact business or conducting		and hereby
This corporation revokes the authority of its registered agent is appoints the Department of State as its agent for service of prothe time it was authorized to transact business or conduct affairs	cess based on a cause of action aris	
The following is a current mailing address for the corporation:		COLAHA
c/o Veronica Cote at 307 Post Road		SSS -
(Mailing Address)		70 A
North Salem, NY 10560		100 :8 100 :8
(City/ State /Zip)		- AM •
The corporation agrees to notify the Department of State in the f	uture of any change in its mailing ac	ddress.
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)	
Enrico Anders	Deputy-CEO	
(Typed or printed name of person signing)	(Title of person signing)	

FILING FEE \$35