

M00000001746

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

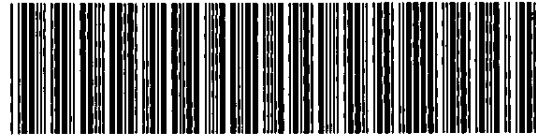
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700163639577

01/04/10--01001--015 \*\*165.00

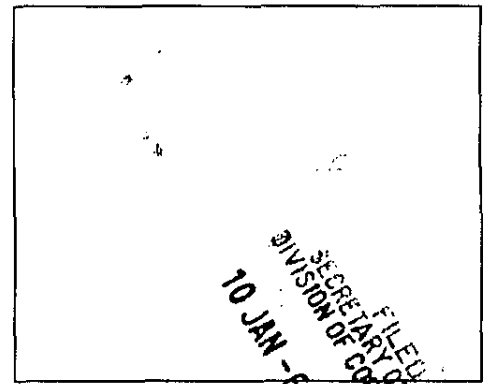
FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 JAN - 6 PM 3:18

B. KOHR

JAN 11 2010

EXAMINER

FLORIDA RESEARCH & FILING SERVICES, INC.  
1211 CIRCLE DRIVE  
TALLAHASSEE, FL 32301  
PHONE (850)656-6446



OFFICE USE ONLY

WALK-IN

ENTITY NAME:

AST, LLC

CK# 4326

AMOUNT \$45.00

PLEASE FILE THE ATTACHED WITHDRAWAL & RETURN THE FOLLOWING:

- ☐ CERTIFIED COPY
- ☐ STAMPED COPY
- ☐ CERTIFICATE OF STATUS

Examiner's Initials

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR  
WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN  
FLORIDA**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 JAN -6 PM 3:18

AST LLC

(Name of limited liability company)

DELAWARE

(Jurisdiction of its organization)

This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.

This limited liability company revokes the authority of its registered agent 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 in Florida.

1 HSN Drive

(Mailing address)

St. Petersburg, FL 33729

(City/State/Zip)

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

HSN LP, its Member, by HSN, Inc., its General Partner

By:

*Matthew D. Soyster*

(Signature of member or authorized representative of a member)

Matthew D. Soyster, SVP, GC - Affiliates and Cornerstone Brands

(Typed or printed name of signer)

Filing Fee: \$25.00