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236 East 6th Avenue, Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

		PICK UP:	04/24/2019	
	CERTIFIED CO	PY		
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	CUS			
хx	FILING	WITH	IDRAWAL	
1.	NATIONWIDE CO (CORPORATE NAME AND		CIALIST, LLC	
2. 3.	(CORPORATE NAME AND	DOCUMENT#)		
1 .	(CORPORATE NAME AND	DOCUMENT#)		
5.	(CORPORATE NAME AND			
5.	(CORPORATE NAME AND	DOCUMENT #)		
	(CORPORATE NAME AND	DOCUMENT#)		

COVER LETTER

TO:

TO: Registration Section Division of Corporations
SUBJECT: NationWide CONVEYOR Specialists (Name of Foreign Limited Liability Company)
o was allowing company)
Dear Sir or Madam:
The enclosed withdrawal and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Richard Bugryn (Name of Person)
MationWile Conveyor Specialists LLC
340 MAPle Ave.
Bristol, CE, 06018 (City/State and Zip Code)
For further information concerning this matter, please call: Concerning this matter, please call: Concerning this matter, please c
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:
S35 Filing Fee & S55 Filing Fee & S60 Filing Fee, Certificate of Status Certified Copy Certified Copy Certified Copy Certified Copy

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Nationwide Conveyor Specialis	st. LLC
(Name of limited hability company) Connecticut (Jurisdiction of its organization)	v.
(Jurisdiction of its organization) 4-12-05 (Date registered with Florida Department of State)	PIL PIL
m ~ = 19~4	# ED
(Florida Document Number) This limited liability company is withdrawing its certificate of authority in this	7: 57
Effective Date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to more than 90 days after filing.) Note: If the date inserted in this block does not meet the applicable statutory this date will not be listed as the document's effective date on the Department.	(optional) date of filing or filing requirements,
(Signature of authorized representative)	
Richard Bugryn (Typed or printed name of signee)	