

M07000003896

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

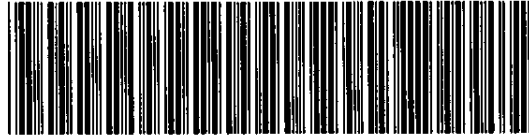
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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APR 01 2015  
J. HARRIS

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Centre Leam Solutions, LLC  
(Name of Foreign Limited Liability 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:

Jason Paluck  
(Name of Person)

Centre Leam Solutions, LLC  
(Firm/Company)

16326 Mount Airy Road  
(Address)

Shrewsbury, PA 17361  
(City/State and Zip Code)

For further information concerning this matter, please call:

Jason Paluck at ( 717 ) 227-4655 x1002  
(Name of Person) (Area Code & Daytime Telephone Number)

### 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:

☐ \$25 Filing Fee

☐ \$30 Filing Fee &  
Certificate of Status

☐ \$55 Filing Fee &  
Certified Copy

☒ \$60 Filing Fee,  
Certificate of Status &  
Certified Copy

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

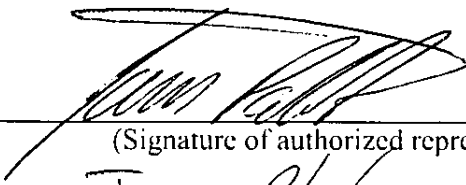
Centre Leam Solutions, LLC  
(Name of limited liability company)

Pennsylvania  
(Jurisdiction of its organization)

6/26/2007  
(Date registered with Florida Department of State)

M07000003896  
(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.

  
(Signature of authorized representative)

Jason Polak  
(Typed or printed name of signee)

Filing Fee: \$25.00

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA