

ME9 000 000 871

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

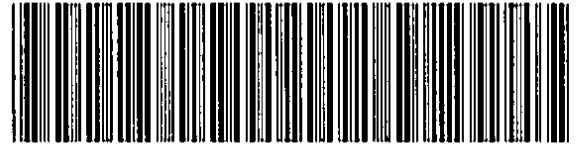
(Business Entity Name)

(Document Number)

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2020 FEB 24 AM 10:39  
STATE OF ALABAMA  
J. J. J. J.

Withdrawal

MAR 18 2020  
I ALBRITTON

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: M.D.S.A., 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:

Lisa Gilgrist  
(Name of Person)

M.D.S.A., LLC  
(Firm/Company)

650 Engineering Drive  
(Address)

Norcross, GA, 30092  
(City/State and Zip Code)

For further information concerning this matter, please call:

Lisa Gilgrist at ( 770 ) 448-3900 Ext. 3210  
(Name of Person) (Area Code & Daytime Telephone Number)

**Mailing Address:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

MDSA, LLC dba Mighty Distributing System of America, LLC

(Name of limited liability company)

State of Georgia

(Jurisdiction of its organization)

March 2, 2009

(Date registered with Florida Department of State)

M09000000871

(Florida Document Number)

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

Effective Date, if other than the date of filing: \_\_\_\_\_ (optional)  
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.



(Signature of authorized representative)

Lisa Gilgrist

(Typed or printed name of signee)

Filing Fee: \$25.00

FILED  
2020 FEB 24 AM 10:39  
CLERK OF THE COURT  
JUDICIAL CIRCUIT IN AND FOR  
THE NINTH JUDICIAL CIRCUIT  
TALLAHASSEE, FLORIDA