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To:

Division of Corporations

: (850)617-6383 Fax Number

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 (614)280-3338 Phone Fax Number

LLC DISSOLUTION OR WITHDRAWAL DIV ACQUISTION, LLC

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$25.00 |

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Electronic Filing Menu Corporate Sing Mounts

Help

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

| DIV Acquisition | n, LLC | |
|-----------------|--|-----------------------|
| | (Name of limited liability company) | |
| Massachusetts | · | |
| | (Jurisdiction of its organization) | |
| May 21, 2010 | , | |
| | (Date registered with Florida Department of State) | |
| M0000002324 | | |
| | (Florida Document Number) | |
| This limited l | ability company is withdrawing its certificate of authority in this state. | SEGRETAR TALLAHASS |
| | (Signalure of authorized representative) Jonathan G. Davis, Mänager | 7 A |
| | (Typed or printed name of signee) | 9: 34 |

Filing Fee: \$25.00

COVER LETTER

| TO: Registration Division of | Section Corporations | | |
|---|---|--|---|
| DIV A | equisition, LLC | | |
| SUBJECT: | (Name of Fo | reign Limited Liability (| Company) |
| Dear Sir or Madam: | | | |
| The enclosed withdr | awal and fee(s) are submitte | d for filing. | |
| Piease return all corr | espondence concerning this | matter to the following | 1 |
| Kathleen Kelly | | | |
| | (Name of Person) | | • |
| The Davis Compani | es | | • |
| | (Firm/Company) | | |
| 125 High Street, Sui | te 2111 | | |
| | (Address) | | |
| Boston, MA 02110- | 2704 | | |
| | (City/State and Zip Cod | le) | • |
| For further informati | on concerning this matter, p | lease call: | |
| Kathleen Kelly | | 617 | 986-6334 |
| (N _i | ime of Person) | | 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 | | ration Section on of Corporations Sox 6327 | |
| Enclosed is a check | for the following amount: 330 Filing Fee & Certificate of Status | S55 Filing Fee & Certified Copy | ☐ \$60 Filing Fee, Certificate of Status & Certified Copy |