

M 1100000 2945

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

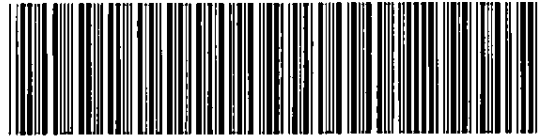
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FEB 20 2025

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2025 FEB 19 AM 11:15

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2025 FEB 19 PM 3:15

CT CORP
(850) 656-4724
3458 lakesore Drive
Tallahassee, FL 32312

Date: 02/19/2025

Acc#120160000072

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Name:	LUMISHORE USA, LLC
Document #:	
Order #:	16160079

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
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Amount: \$ **25.00**

Thank you!

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lumishore USA, 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:

Samuel Olawaiye

(Name of Person)

Garmin International, Inc.

(Firm/Company)

1200 E 151st St.

(Address)

Olathe, KS 66062

(City/State and Zip Code)

For further information concerning this matter, please call:

Samuel Olawaiye

(Name of Person)

913

440-2699

at (

_____) _____
(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

Lumishore USA, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

6/9/2011

(Date registered with Florida Department of State)

M11000002945

(Florida Document Number)

FILED
2016 FEB 19 AM 11:15
CLERK OF COURT
STATE OF FLORIDA

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.

Douglas G. Boessen

(Signature of authorized representative)

Douglas G. Boessen

(Typed or printed name of signee)

Filing Fee: \$25.00