M10000 2990

(Requ	iestor's Name)		
(Addre	ess)		
(Addre	ess)		
(City/S	State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificates of	Status	
Special Instructions to Filing Officer:			
	J. HORNE		
	DEC - 6 2024		
	2222		

Office Use Only



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FILED 2024 JAN -3 PH 1: 05 SELPA DE TESTATA

2020 JEH - 3 PH 3: 23

CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

ACCOUNT	NO.	:	120000000195	,

REFERENCE: 810134 7708745

AUTHORIZATION :

COST LIMIT : \$ 25.0 Charles and a cost Limit :

ORDER DATE: December 4, 2024

ORDER TIME : 11:30 AM

ORDER NO. : 810134-130

CUSTOMER NO: 7708745

FOREIGN FILINGS

NAME: UNIRUSH, LLC

CORPORATE
LIMITED PARTNERSHIP
LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF STATUS

CONTACT PERSON: Shauna Godbolt - EXT#

EXAMINER:

1

COVER LETTER

TO: Registration Division of	ı Section Corporations		
SUBJECT: Unirus	sh, LLC	eign Limited Liability	Company)
	(· · · · · · · · · · · · · · · · · · ·	eigii Biiiiied Bidoiiii,	Zompany,
Dear Sir or Madam:			
The enclosed withdra	awal and fee(s) are submitte	d for filing.	
Please return all corr	espondence concerning this	matter to the followin	g:
Jo Mann			
	(Name of Person)		_
Green Dot Corpora	ation		
	(Firm/Company)		_
4675 Cornell Rd, S	Ste 280,		
	(Address)		_
Cincinnati, OH 452	241-2495		_
	(City/State and Zip Cod	e)	_
For further informati	on concerning this matter, p	lease call:	
Jo Mann		626 at (765-2928
(N	ame of Person)		& Daytime Telephone Number)
	on Section of Corporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee
	ee. FL 32314		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



Unirush, LLC	
(Name of limited liability	company)
DE	
(Jurisdiction of its organ	nization)
06/10/2011	
(Date registered with Florida Dep	partment of State)
M11000002990	
(Florida Document No	umber)
Effective Date, if other than the date of filing:	nd cannot be prior to date of filing or eapplicable statutory filing requirements.
(Signature of authorized :	representative)
(Typed or printed name	ne of signee)

Filing Fee: \$25.00