2/27/2019

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το:	Division of Corporations Fax Number : (850)617-6383			ليہ جز:	• •
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MERCH/	LLC DISSOLUTION OR V ANTS' CHOICE PAYMENT SOL		.ORIDA	, LLC	
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Help



NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Merchanis' Choice Payment Solutions of Florida, LLC

:

(Name of limited liability company)

(Jurisdiction of its organization)	
11/4/2011	ر - د - د -
(Date registered with Florida Department of State)	_0 _0
M11000005586	~ <u>.</u>
(Florida Document Number)	
This limited liability company is withdrawing its certificate of authority in this	state.
FOT when Date 16 achieve the date of filling	רر: ب(antional)

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)

Doug Lewin

(Typed or printed name of signee)