

m12000003564

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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2016 FEB -9 A 8:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FEB 10 2016

3 MASON

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 998890 7863214

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : February 8, 2016

ORDER TIME : 10:04 AM

ORDER NO. : 998890-010

CUSTOMER NO: 7863214

FOREIGN FILINGS

NAME: HAMILTON-RYKER IT SOLUTIONS,
LLC

☐ CORPORATE
☐ LIMITED PARTNERSHIP
☒ LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF STATUS

CONTACT PERSON: Melissa Zender - EXT# 62956

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Hamilton-Ryker IT Solutions, 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:

Teresa Barner
(Name of Person)

Hamilton-Ryker
(Firm/Company)

Po Box 1068
(Address)

Martin TN 38237
(City/State and Zip Code)

For further information concerning this matter, please call:

_____ at (_____) _____
(Name of Person) (Area Code & 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

Enclosed is a check for the following amount:

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &
Certified Copy | <input type="checkbox"/> \$60 Filing Fee,
Certificate of Status &
Certified Copy |
|--|---|--|--|

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

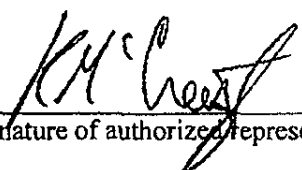
Hamilton Ryker IT Solutions, LLC
(Name of limited liability company)

TN
(Jurisdiction of its organization)

6-22-12
(Date registered with Florida Department of State)

M12000003564
(Florida Document Number)

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


(Signature of authorized representative)

Kelly McCreight
(Typed or printed name of signee)

Filing Fee: \$25.00

FILED
2016 FEB -9 A 8:44
SECRETARY OF STATE
TAMPA, FLORIDA