

M12000005311

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

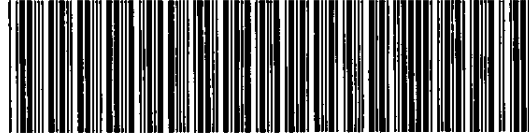
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

JAN 09 2015
J. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Point Across 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:

Chris Arndt

(Name of Person)

Point Across Solutions, LLC

(Firm/Company)

5555 South Street

(Address)

Lincoln, NE 68506

(City/State and Zip Code)

For further information concerning this matter, please call:

Chris Arndt

(Name of Person)

402

483-7512

at ()

(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

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TALLAHASSEE FLORIDA

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

Point Across Solutions, LLC

(Name of limited liability company)

Nebraska

(Jurisdiction of its organization)

September 21, 2012

(Date registered with Florida Department of State)

M12000005311

(Florida Document Number)

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



(Signature of authorized representative)

David J. Byrnes

(Typed or printed name of signee)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

Filing Fee: \$25.00