

M12000005495

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR - 5 2014

T. BROWN

February 27, 2014

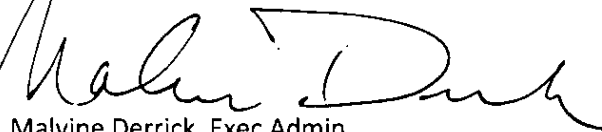
Florida Dept of State
Registration Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: Notice of Withdrawal for
Prism Facility Services, LLC

To Whom It May Concern:

Enclosed please find the Cover Letter, Notice of Withdrawal of Certificate of Authority for Prism Facility Services, LLC, and a check in the amount of \$25.00. Please process paperwork & should you have any questions, I can be reached at 732-836-0642. Thank you & have a great day.

Sincerely,



Malvine Derrick, Exec Admin
The Prism Group, LLC

Encls.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Prism Facility Services, 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:

Malvine Derrick

(Name of Person)

Prism Facility Services, LLC

(Firm/Company)

1995 Swarthmore Ave, Ste 2

(Address)

Lakewood, NJ 08701

(City/State and Zip Code)

For further information concerning this matter, please call:

Malvine Derrick

(Name of Person)

at (732) 836-0642

(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:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Prism Facility Services, LLC

(Name of limited liability company)

NJ

(Jurisdiction of its organization)

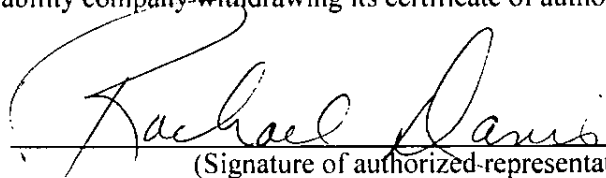
10/1/2012

(Date registered with Florida Department of State)

M12000005495

(Florida Document Number)

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


(Signature of authorized representative)

Rachael Davis

(Typed or printed name of signee)

3/27/14

Filing Fee: \$25.00