M12100006966

(Req	juestor's Name)	
(Add	iress)	·
(Add	Iress)	
(City	/State/Zip/Phon	ne #)
	☐ WAIT	
(Bus	siness Entity Na	me)
(Document Number)		
Certified Copies	Certificate	s of Status
Special Instructions to Filing Officer:		

Office Use Only



800292857258

12/13/16--01005--017 **30.00

DEC 1 4 2016 S. YOUNG

SECREJARY OF STATE TALLAHASSEE. FLORION

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: HQ 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:				
Clare Wadsworth (Name of Person)				
Port City Staffing (FirmCompany)				
P.O. Box 7660 (Address)				
Wilmington, NC 28406 (City/State and Zip Code)				
For further information concerning this matter, please call:				
Clare Wadsworth at (910) 616-8855 (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 \$\frac{1}{2}\$\$30 Filing Fee \$\frac{1}{2}\$\$ Certificate of Status \$\frac{1}{2}\$\$ Certified Copy \$\frac{1}{2}\$\$ Certified Copy				

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

H2 Solutions, LLC (Name of limited liability company)		
_		
North Cavolina (Jurisdiction of its organization)		
(Date registered with Florida Department of State)	 	
M12000006966		
(Florida Document Number)		
This limited liability company is withdrawing its certificate of authority in this state.	16	55. 55.
	IG DEC 13	るる。
John March		1555 1555 1555 1555 1555 1555 1555 155
(Signature of authorized representative)	PH	
John Nelvan Reynolds (Typed or printed name of signee)	4: 20	25 55 65

Filing Fee: \$25.00