

M13000000195

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

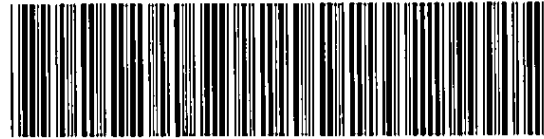
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Received
2021 Feb 04: PM 2:04

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FEB 03 2021

RECEIVED
2021 FEB-4 PM 1:57
CLERK OF STATE
TALLAHASSEE, FL

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

ACCOUNT NO. : I20000000195

REFERENCE : 610840 8175985

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : January 11, 2021

ORDER TIME : 12:02 PM

ORDER NO. : 610840-110

CUSTOMER NO: 8175985

FOREIGN FILINGS

NAME: CONDUENT ASSET MANAGEMENT
GROUP, LLC

____ CORPORATE
____ LIMITED PARTNERSHIP
XX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
____ PLAIN STAMPED COPY
____ CERTIFICATE OF STATUS

CONTACT PERSON: Alexxis Weiland - EXT#

EXAMINER: _____

COVER LETTER

TO: Registration Section,
Division of Corporations

SUBJECT: Conduent Asset Management Group, LLC
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

(Name of Person)

(Firm Company)

(Address)

(City, State and Zip Code)

For further information concerning this matter, please call:

(Name of Person) at _____
(Area Code & District Telephone Number)

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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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NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Conduent Asset Management Group, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

01/09/2013

(Date registered with Florida Department of State)

M13000000195

(Florida Document Number)

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

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.

2021 FEB 4 PM 1:57
DEPT. OF STATE
TALLAHASSEE, FL.

FILED

(Signature of authorized representative)

Kevin Cragle

(Typed or printed name of signer)

Filing Fee: \$25.00