

M/3000000652

Requestor's Name)

Address)

Address)

City/State/Zip/Phone #)

PICK-UP WAIT MAIL

Business Entity Name)

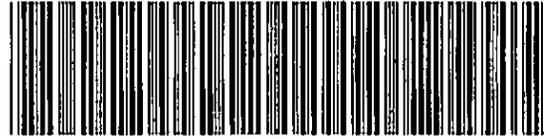
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SECRETARY OF STATE
INDIANAPOLIS, IN 46204

18 APR - 2 PM 3:42

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K. SALY
APR 3 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WAVESTORE USA 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:

LEVENTE ACS

(Name of Person)

c/o AISG Inc

(Firm/Company)

114-02 15th AVENUE

(Address)

COLLEGE POINT, NY 11356-1402

(City/State and Zip Code)

For further information concerning this matter, please call:

LEVENTE ACS

(Name of Person)

at (118) 576-1471

(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

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

WAVE STORE USA LLC
(Name of limited liability company)

NY
(Jurisdiction of its organization)

01/30/13
(Date registered with Florida Department of State)

M 13000000 652
(Florida Document Number)

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STATE

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

Effective Date, if other than the date of filing: 12/31/17 (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.



LEVENTE ACS

(Signature of authorized representative)

LEVENTE ACS

(Typed or printed name of signee)

Filing Fee: \$25.00



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 19, 2018

LEVENT, ACS
C/O AISG INC
114-02 15TH AVE, 3RD FLOOR
COLLAGE POINT, NY 11356

SUBJECT: WAVESTORE USA, LLC
Ref. Number: M13000000652

We have received your document for WAVESTORE USA, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA LLC, but your entity is a FOREIGN LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 018A00005494

RECEIVED

APR 02 2018