

M13000001453

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

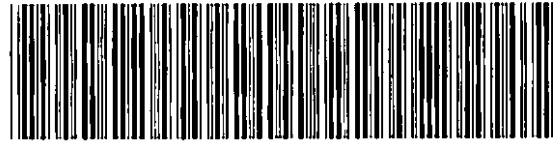
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FL

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CLERK OF COURT
TALLAHASSEE, FL

O SIMMONS
FEB 23 2022



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: I20000000088

Date: 02/21/2022

Name: Merritt Walker

Reference #: 1599856

Entity Name: PERFORMANCE TITLE, LLC

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☒ Dissolution/Withdrawal

☐ Fictitious Name

☒ Other CERTIFIED COPY OF THE FILING EVIDENCE

Authorized Amount: \$55

Signature: 

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PERFORMANCE TITLE, 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:

Jen Borden

(Name of Person)

PERFORMANCE TITLE, LLC

(Firm/Company)

88 Silva Lane, Suite 210

(Address)

Middletown, RI 02842

(City/State and Zip Code)

For further information concerning this matter, please call:

Jen Borden

(Name of Person)

at (401) 378-3769

(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:

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &
Certified Copy | <input type="checkbox"/> \$60 Filing Fee,
Certificate of Status &
Certified Copy |
|--|---|--|--|

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SECRETARY OF STATE

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

PERFORMANCE TITLE, LLC

(Name of limited liability company)

LOUISIANA

(Jurisdiction of its organization)

03/01/13

(Date registered with Florida Department of State)

M13000001453

(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.

DocuSigned by

Robert J. Smith

C781A03C5A15472

(Signature of authorized representative)

Robert J. Smith

(Typed or printed name of signee)

Filing Fee: \$25.00