

M13000007690

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

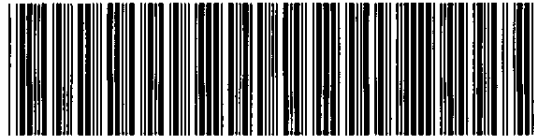
(Document Number)

Certified Copies _____

Certificates of Status _____

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Office Use Only




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O SIMMONS
APR 09 2017

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

ACCOUNT NO. : I20000000195
REFERENCE : 463440 5173143
AUTHORIZATION : 
COST LIMIT : \$ 25.00

ORDER DATE : January 12, 2017
ORDER TIME : 3:24 PM
ORDER NO. : 463440-080
CUSTOMER NO: 5173143

FOREIGN FILINGS

NAME: NTHRIVE ADVANCED TECHNOLOGIES,
LLC

☐ CORPORATE
☐ LIMITED PARTNERSHIP
☒ LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF STATUS

CONTACT PERSON: Melissa Zender - EXT#

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: nThrive Advanced Technologies, 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:

Daniel Mulligan

(Name of Person)

nThrive Advanced Technologies, LLC

(Firm/Company)

200 North Point Center E., Suite 600

(Address)

Alpharetta, GA 30022

(City/State and Zip Code)

For further information concerning this matter, please call:

_____ at (_____) _____
(Name of Person) (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 |
|--|---|--|--|

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

nThrive Advanced Technologies, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

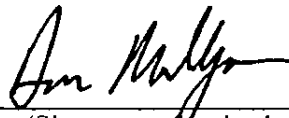
12/06/2013

(Date registered with Florida Department of State)

M13000007690

(Florida Document Number)

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



(Signature of authorized representative)

Daniel Mulligan

(Typed or printed name of signee)

17 FEB -5 AM 09:21

Filing Fee: \$25.00