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(Requestor's Name)

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☐ PICK-UP

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(Business Entity Name)

(Document Number)

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S Warren
NOV 21 2016

Date: 11/18/2016

Account #: 120000000088

Name: Marisa Kugelman

Reference #: D293830

ENTITY NAME: FOLEY CARRIER INSURANCE SERVICES, LLC

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Annual Report

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☒ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other: _____

Authorized Amount: \$25.00

Signature: 

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Foley Carrier Insurance Services, 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:

Mary Henry

(Name of Person)

Foley Carrier Services, LLC

(Firm/Company)

10 New England Business Center, Suite 202

(Address)

Andover, MA 01810

(City/State and Zip Code)

For further information concerning this matter, please call:

Mary Henry

(Name of Person)

at (978)

699-3166
(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

Foley Carrier Insurance Services, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

1/17/2014

(Date registered with Florida Department of State)

M14000000345

(Florida Document Number)

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



(Signature of authorized representative)

Mary Henry

(Typed or printed name of signee)

Filing Fee: \$25.00

FILED
2013 NOV 18 A 9:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA